## FORM C4





STAFF: Position: Div/Dept:		Javed Aziz			AGENT:			Exceed Information Technology Jan 2024 ADNOC HQ Not Applicable		
		Sr. Systen	Sr. Systems Analyst  IT Business Solutions Division			Month/Year: SITE: A/c Code:				
		IT Busines								
		Hours						Hours		
Date	Day	Normal	Overtime	Total	Date	Day	Normal	Overtime	Total	
1	Monday	PH	-	-	17	Wednesda	у Р	-	8	
2	Tuesday	Р	_	8	18	Thursday	Р	-	8	
3	Wednesday	Р	_	8	19	Friday	Р	_	8	
4	Thursday	Р	_	8	20	Saturday	S/S	-	-	
5	Friday	Р	_	8	21	Sunday	S/S	-	-	
6	Saturday	S/S	_	-	22	Monday	Р	-	8	
7	Sunday	S/S	-	-	23	Tuesday	Р	-	8	
8	Monday	Р	_	8	24	Wednesda	у Р	-	8	
9	Tuesday	Р	_	8	25	Thursday	Р	-	8	
10	Wednesday	Р	-	8	26	Friday	Р	-	8	
11	Thursday	Р	-	8	27	Saturday	S/S	-	-	
12	Friday	Р	_	8	28	Sunday	S/S	-	-	
13	Saturday	S/S	_	-	29	Monday	Р	_	8	
14	Sunday	S/S	-	-	30	Tuesday	Р	-	8	
15	Monday	Р	_	8	31	Wednesda	у Р	_	8	
16	Tuesday	Р	_	8	Total		-		176	
	H – Public Holiday, F	PL – Paid Leave	e, UL – Unpaid i	Leave, S/S –	Weekly off	on Saturday/S	Sunday, SL – Sic	k Leave, A-A	bsent, P –	
Presen	t (for monthly staff)  Prepared By	<u>/:</u>	Endorsed			d Bv:		Approved By:		
Javed Aziz			Justa Qandil				Hamdan Abdulla Al Shkeili			
Sr. Systems Analyst			Dept Manager / Head			05/02)∕éige President				
Date: Date:					Date:					
STAFF	hereby certifies re	ceipt of his/he	r respective m	onthly salary	in full wit	hout any dedu	ıctions.			
		Signature and				-				
			MPANY) ACC	OUNTS PAY	ABLE DI	EPARTMENT	ONLY			
Reviewed By					Approved By					
Date:					Date:					