

## SCHEDULE C

Exhibit - I

Contract No. 44000-----  
RFX No. \_\_\_\_\_



## CONTRACTOR PERSONNEL TIMESHEET

Sector	ITC	Org. Code Title	ITNWOMG	Contract No.	4400015677	Serv.Order #			
Department	ITC Network Operations Department	Org. Code Number	606022601	Contract Title	ITC MANPOWER CONTRACT				
Oper. Area	Central Operation Area	Cost Object No.		Contractor Name	SAUDI BUSINESS MACHINES LIMITED (SBM)				
Vacation Days	30	Vacation Approved	7	Vacation Quota Balance	23				

Contractor's Employee		Item / Job Code No.	Job Title	Type	Month :	September												Year :	2022												Total Hours	
ID Number	Name				9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27	9/28
2003882137	Abdul hamed I. El-topjy	1049	IT Infrastructure Operations and Mainte	Regular	8	XX	XX	8	8	8	8	XX	XX	8	8	8	8	8	XX	XX	8	8	8	8	H	XX	8	8	8	8	XX	160
				Offshore																											0	
				Overtime																											0	
				Totals	8	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	8	0	0	0	8	8	8	0	0

## NOTES:

The Form is to be approved by Division Manager or Above.

Fill the pre-approved overtime from the authorized person according to the Company Rules.

Original Soft/Hard copy of the Form is accepted.

Attach Medical report in case of Sick Leave along with approved sick leave form.

Attach official report copy for (Marriage / Newborn / Death) with proof certification.

Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

## Filling Instructions

Fill in Actual Working Hours only.

Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Abdul Hamed Ismael Eltopjy
Title :	IT Infrastructure Operations and Maintenance
Badge #	
Division:	
Department:	ITC Network Operations Department
Phone #	0114086619 -- 0509574550
Email :	AITopjy@se.com.sa
Signature :	

Company Approval	
Name :	Salem M. AlGhtany
Title :	ITC Network Operations Department Manager
Badge #	52817
Division:	
Department:	ITC Network Operations Department
Phone #	011-408-6200
Email :	SMGhtany@se.com.sa
Signature :	

**SCHEDULE C**

Exhibit - I

Contract No.

44000-----

RFX No.

**CONTRACTOR PERSONNEL TIMESHEET**

<b>Sector</b>	ITC	<b>Org. Code Title</b>		<b>Contract No.</b>	4400015677	<b>Serv.Order #</b>	
<b>Department</b>	Planning & Projects	<b>Org. Code Number</b>		<b>Contract Title</b>	ITC Manpower Supply Contract		
<b>Oper. Area</b>	Jeddah - HQ	<b>Cost Object No.</b>		<b>Contractor Name</b>	SBM		
<b>Vacation Days</b>	30	<b>Vacation Approved</b>	1	<b>Vacation Quota Balance</b>	29		

<b>Contractor's Employee</b>		<b>Item / Job Code No.</b>	<b>Job Title</b>	<b>Type</b>	<b>September</b>														<b>Year :</b>		<b>2022</b>										<b>Total Hours</b>		
<b>ID Number</b>	<b>Name</b>				9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27	9/28	9/29
1017793090 800307	Ahmad A. Faloudah	786	Project Manager I	Regular	8	X	X	8	8	8	8	X	X	8	8	8	8	X	X	8	8	8	H	X	X	8	8	8	8	X	X	160	
				Offshore	0	X	X	0	0	0	0	0	X	X	0	0	0	0	X	X	0	0	0	0	X	X	0	0	0	0	X	X	0
				Overtime																												0	
				Totals	8	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	8	0	0	0	8	8	8	0	160	

**NOTES:**

The Form is to be approved by Division Manager or Above.

Fill the pre-approved overtime from the authorized person according to the Company Rules.

Original Soft/Hard copy of the Form is accepted.

Attach Medical report in case of Sick Leave along with approved sick leave form.

Attach official report copy for (Marriage / Newborn / Death) with proof certification.

Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

**Filling Instructions**

Fill in Actual Working Hours only.

Highlight Weekends - Holidays - Saudi National Day.

<b>Symbol</b>	<b>Represent</b>
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

<b>Contractor's Employee</b>	
Name :	Ahmad A. Faloudah
Title :	Project Manager I
Badge #:	1017793090
Division:	Project Execution
Department:	ITC Planning & Projects
Phone #:	012-6538381
Email :	afaloudah@se.com.sa
Signature :	

<b>Company Approval</b>	
Name :	Abdullah M. Al-Talhah
Title :	Division Manager
Badge #:	
Division:	Project Execution
Department:	ITC Planning & Projects
Phone #:	013-8586262
Email :	AMTALHAH@se.com.sa
Signature :	

## CONTRACTOR PERSONNEL TIMESHEET



Sector	IT & Communications	Org. Code Title		Contract No.	4400015677	Serv.Order #			
Department	Planning & Projects Dept.	Org. Code Number		Contract Title	ITC MANPOWER SUPPLY CONTRACT				
Oper. Area	Eastern Operating Area	Cost Object No.		Contractor Name	Saudi Business Machines Limited (SBM)				
Vacation Days	30	Vacation Approved	0	Vacation Quota Balance	30				

Contractor's Employee		Item / Job Code No.	Job Title	Type	Month :		SEPTEMBER												Year :		2022												Total
ID Number	Name				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29
2021098138	GHANDI S. NASER	964	Project Manager I	Regular	8	X	X	8	8	8	8	X	X	8	8	8	8	X	X	8	8	8	H	X	X	8	8	8	8	8	X	160	
				Offshore		X	X					X	X					X	X					X	X						X	0	
				Overtime		X	X					X	X					X	X					X	X						X	0	
				Totals	8	0	0	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	0	0	0	8	8	8	8	0	160		

**NOTES:**

The Form is to be approved by Division Manager or Above.  
 Fill the pre-approved overtime from the authorized person according to the Company Rules.  
 Original Soft/Hard copy of the Form is accepted.  
 Attach Medical report in case of Sick Leave along with approved sick leave form.  
 Attach official report copy for (Marriage / Newborn / Death) with proof certification.  
 Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

**Filling Instructions**

Fill in Actual Working Hours only.  
 Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

**Contractor's Employee**

Name :	GHANDI S. NASER
Title :	IT Projects Engineering Analyst I
Badge #	2021098138
Division:	Execution Division
Department:	Planning & Project Department
Phone #	013-858 6421
Email :	<a href="mailto:GSNaser@se.com.sa">GSNaser@se.com.sa</a>
Signature :	

**Company Approval**

Name :	ABDULLAH M. AL-TALHAH
Title :	Division Manager
Badge #	67825
Division:	Execution Division
Department:	Planning & Project Department
Phone #	013 858 6262
Email :	<a href="mailto:AMTALHAH@se.com.sa">AMTALHAH@se.com.sa</a>
Signature :	

**SCHEDULE C**

Exhibit - I

Contract No.

4400015677

RFX No.

**CONTRACTOR PERSONNEL TIMESHEET**

Sector	ITC	Org. Code Title	ITNWOMG	Contract No.	4400015677	Serv.Order #	
Department	ITCNWOD	Org. Code Number	606022601	Contract Title	ITC MANPOWER CONTRACT		
Oper. Area	COA	Cost Object No.		Contractor Name	SAUDI BUSINESS MACHINES LIMITED (SBM)		
Vacation Days	30	Vacation Approved	0	Vacation Quota Balance	30		

Contractor's Employee		Item /Job Code No.	Job Title	Type	Month : September												Year : 2022												Total Hours		
ID Number	Name				9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27
2331182788	HANI MOHAMMED AHMED WAHBAH	1054	Database Administrator	Regular	8	X	X	8	8	8	8	8	X	X	8	8	8	X	X	8	8	8	H	X	X	8	8	8	8	X	160
				Offshore																											0
				Overtime					3	4	4										3	3	4					3	4		28
				Totals	8	0	0	8	8	11	12	12	0	0	8	8	8	8	8	0	0	11	11	12	8	0	0	0	8	11	12

**NOTES:**

The Form is to be approved by Division Manager or Above.

Fill the pre-approved overtime from the authorized person according to the Company Rules.

Original Soft/Hard copy of the Form is accepted.

Attach Medical report in case of Sick Leave along with approved sick leave form.

Attach official report copy for (Marriage / Newborn / Death) with proof certification.

Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

**Filling Instructions**

Fill in Actual Working Hours only.

Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Hani Mohammed Ahmed Wawbah
Title :	Database Administrator
Badge #	2331182788
Division:	Telecom Services Division
Department:	Network Operations & Collaboration Department
Phone #	114086403
Email :	<a href="mailto:HMWahbah@se.com.sa">HMWahbah@se.com.sa</a>
Signature :	

Company Approval	
Name :	Fares B Al-shatry
Title :	Division Manager
Badge #	60458
Division:	Telecom Services Division
Department:	Network Operations & Collaboration Department
Phone #	114086115
Email :	<a href="mailto:faresb@SE.COM.SA">faresb@SE.COM.SA</a>
Signature :	

## CONTRACTOR PERSONNEL TIMESHEET

Sector	ITC	Org. Code Title		Contract No.	4400015677	Serv.Order #	
Department	IT Systems Operation Department	Org. Code Number		Contract Title	ITC MANPOWER CONTRACT		
Oper. Area		Cost Object No.		Contractor Name	SAUDI BUSINESS MACHINES LIMITED (SBM)		
Vacation Days	30	Vacation Approved	10	Vacation Quota Balance	20		

Contractor's Employee		Item /Job Code No.	Job Title	Type	Month :		September										Year :		2022										Total Hours				
ID Number	Name				9-1	9-2	9-3	9-4	9-5	9-6	9-7	9-8	9-9	9-10	9-11	9-12	9-13	9-14	9-15	9-16	9-17	9-18	9-19	9-20	9-21	9-22	9-23	9-24	9-25	9-26	9-27	9-28	9-29
	Kokolu Prabhakar Rao	963	Senior Project Manager	Regular	8	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	H	0	0	8	8	8	8	0	0	160
				Offshore	8	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	H	0	0	8	8	8	8	0	0	160
				Overtime	8	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	H	0	0	8	8	8	8	0	0	160
				Totals	8	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	8	0	0	160

### NOTES:

The Form is to be approved by Division Manager or Above.

Fill the pre-approved overtime from the authorized person according to the Company Rules.

Original Soft/Hard copy of the Form is accepted.

Attach Medical report in case of Sick Leave along with approved sick leave form.

Attach official report copy for (Marriage / Newborn / Death) with proof certification.

Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

### Filling Instructions

Fill in Actual Working Hours only.

Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Prabhakar Rao Kokolu
Title :	Sr. Project Manager
Badge #	
Division:	
Department:	IT Systems Operation Department
Phone #	0091-9515711702
Email :	prkokolu@se.com.sa
Signature :	

Company Approval	
Name :	Bader M. Al Shamrani
Title :	Division Manager
Badge #	106898
Division:	Smart Network Operations Division
Department:	Utility & Smart Solutions
Phone #	114086509
Email :	bshamrani@se.com.sa
Signature :	



## CONTRACTOR PERSONNEL TIMESHEET

Sector	ITC	Org. Code Title		Contract No.	4400015677	Serv.Order #	
Department	ITC Network Operation Department	Org. Code Number		Contract Title	ITC MANPOWER CONTRACT		
Oper. Area	SOA	Cost Object No.		Contractor Name	SAUDI BUSINESS MACHINES LIMITED (SBM)		
Vacation Days	0	Vacation Approved	0	Vacation Quota Balance	0		

Contractor's Employee		Item / Job Code No.	Job Title	Type	Month : SEPTEMBER												Year : 2022												Total Hours				
ID Number	Name				8/1	8/2	8/3	8/4	8/5	8/6	8/7	8/8	8/9	8/10	8/11	8/12	8/13	8/14	8/15	8/16	8/17	8/18	8/19	8/20	8/21	8/22	8/23	8/24	8/25	8/26	8/27	8/28	8/29
2187929803	Muhammad Nasir Muhammad Mansha	1040	Network Engineer	Regular	8	X	X	8	8	8	8	8	X	X	8	8	8	8	X	X	8	8	8	H	X	X	8	8	8	8	X	160	
				Offshore																											0		
				Overtime															2			2	2					2	2	2	2	2	16
				Totals	8	0	0	8	8	8	8	8	0	0	8	8	8	8	10	0	0	8	8	10	10	0	0	10	10	10	10	0	176

### NOTES:

The Form is to be approved by Division Manager or Above.

Fill the pre-approved overtime from the authorized person according to the Company Rules.

Original Soft/Hard copy of the Form is accepted.

Attach Medical report in case of Sick Leave along with approved sick leave form.

Attach official report copy for (Marriage / Newborn / Death) with proof certification.

Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

### Filling Instructions

Fill in Actual Working Hours only.

Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Muhammad Nasir Muhammad Mansha
Title :	Network Engineer
Badge #	2187929803
Division:	ITC Network Operation Division
Department:	ITC Network Operation Department
Phone #	507962896
Email :	<a href="mailto:mnasir@se.com.sa">mnasir@se.com.sa</a>
Signature :	

Company Approval	
Name :	Ahmad Al-Thobaiti
Title :	Division Manager(A)
Badge #	92914
Division:	ITC Network Operation Division
Department:	ITC Network Operation Department
Phone #	126537702
Email :	<a href="mailto:Aathbiti@se.com.sa">Aathbiti@se.com.sa</a>
Signature :	



## CONTRACTOR PERSONNEL TIMESHEET

Sector	IT and Communications	Org. Code Title	ITC Services Department	Contract No.	4400015677	Serv.Order #	
Department	IT Services Department	Org. Code Number	6021001	Contract Title	ITC MANPOWER CONTRACT		
Oper. Area	Western	Cost Object No.	606021001	Contractor Name	SAUDI BUSINESS MACHINES LIMITED (SBM)		
Vacation Days	30	Vacation Approved	0	Vacation Quota Balance			

Contractor's Employee		Item /Job Code No.	Job Title	Type	Month :	September												Year :	2022										Total Hours			
ID Number	Name				9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27	9/28
2349300752	Mohammed AbdelHamed AlNsour	925	Chief Architect	Regular	8	X	X	8	8	8	8	8	X	X	8	8	8	8	X	X	8	8	8	H	X	X	8	8	8	8	X	160
				Offshore																											0	
				Overtime																											0	
				Totals	8	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	8	0	0	0	8	8	0	160	

### NOTES:

- The Form is to be approved by Division Manager or Above.
- Fill the pre-approved overtime from the authorized person according to the Company Rules.
- Original Soft/Hard copy of the Form is accepted.
- Attach Medical report in case of Sick Leave along with approved sick leave form.
- Attach official report copy for (Marriage / Newborn / Death) with proof certification.
- Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

### Filling Instructions

Fill in Actual Working Hours only.

Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Mohammed AbdelHamed AlNsour
Title :	Chief Architect
Badge #	2349300752
Division:	IT Service Governance and Development Group
Department:	IT Services Department
Phone #	126537593
Email :	<a href="mailto:nsour@se.com.sa">nsour@se.com.sa</a>
Signature :	

Company Approval	
Name :	Mohammed A. AlSalmi
Title :	Division Manager
Badge #	85472
Division:	Assets Change Management Division
Department:	Operations Excellence & Resilience mgt. Department
Phone #	126538657
Email :	<a href="mailto:masalmi@se.com.sa">masalmi@se.com.sa</a>
Signature :	

## CONTRACTOR PERSONNEL TIMESHEET

Sector	ITC	Org. Code Title		Contract No.	4400015677	Serv.Order #	
Department	ITC Services Department	Org. Code Number		Contract Title	ITC MANPOWER CONTRACT		
Oper. Area	Central - Riyadh	Cost Object No.		Contractor Name	SAUDI BUSINESS MACHINES LIMITED (SBM)		
Vacation Days	30	Vacation Approved	0	Vacation Quota Balance	30		

Contractor's Employee		Item /Job Code No.	Job Title	Type	Month : SEPTEMBER												Year : 2022												Total Hours			
					9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27	9/28
2227441793	Mustafa Mamdouh Alshaikh	1007	Engineering Aide B	Regular	8	X	X	8	8	8	8	8	X	X	8	8	8	8	X	X	8	8	8	H	X	X	8	8	8	8	X	160
				Offshore				3	3						3	3					3	3						3	3		24	
				Overtime																											0	
				Totals	8	0	0	8	11	11	8	8	0	0	0	8	11	11	8	8	0	0	8	11	11	8	0	0	8	11	11	8

### NOTES:

- ☒ The Form is to be approved by Division Manager or Above.
- ☒ Fill the pre-approved overtime from the authorized person according to the Company Rules.
- ☒ Original Soft/Hard copy of the Form is accepted.
- ☒ Attach Medical report in case of Sick Leave along with approved sick leave form.
- ☒ Attach official report copy for (Marriage / Newborn / Death) with proof certification.
- ☒ Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

### Filling Instructions

☒ Fill in Actual Working Hours only.

☒ Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Mustafa Mamdouh Alshaikh
Title :	Engineering Aide B
Badge #	2227441793
Division:	ITC Department
Department:	ITC Services
Phone #	47364
Email :	Mshaikh32@se.com.sa
Signature :	

Company Approval	
Name :	Mubarak F.Alshaibani
Title :	ITC Services Division Manegeer
Badge #	60467
Division:	ITC Services Daepartment
Department:	ITC Services
Phone #	79461
Email :	MFShaibani@se.com.sa
Signature :	

## CONTRACTOR PERSONNEL TIMESHEET

Sector	ITC	Org. Code Title		Contract No.	4400015677	Serv.Order #	
Department		Org. Code Number		Contract Title	ITC MANPOWER CONTRACT		
Oper. Area		Cost Object No.		Contractor Name	SAUDI BUSINESS MACHINES LIMITED (SBM)		
Vacation Days	30	Vacation Approved	0	Vacation Quota Balance	0		

Contractor's Employee		Item / Job Code No.	Job Title	Type	Month :	SEPTEMBER												Year :	2022												Total Hours	
					9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27	9/28
2264099819	Saheb Ali Zuber Syed	1006	Engineering Aide A	Regular	8	X	X	8	8	8	8	8	X	X	8	8	8	8	8	X	X	8	8	8	H	X	X	8	8	8	X	160
				Offshore																											0	
				Overtime																											12	
				Totals	8	0	0	10	8	8	8	8	0	0	8	8	13	8	10	0	0	8	8	10	8	0	0	0	8	9	8	8

### NOTES:

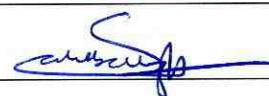
The Form is to be approved by Division Manager or Above.  
 Fill the pre-approved overtime from the authorized person according to the Company Rules.  
 Original Soft/Hard copy of the Form is accepted.  
 Attach Medical report in case of Sick Leave along with approved sick leave form.  
 Attach official report copy for (Marriage / Newborn / Death) with proof certification.  
 Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

### Filling Instructions

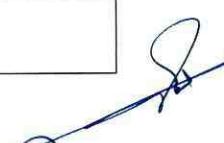
Fill in Actual Working Hours only.

Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Saheb Ali Zuber Syed
Title :	Engineering Aide A
Badge #	2264099819
Division:	ITC - Services COA
Department:	ITC - Services Dept.
Phone #	598315364
Email :	Sazuber@se.com.sa
Signature :	

Company Approval	
Name :	SALEH HAMAD R ALANAZI
Title :	ITC - Services COA Division Manager(Acting)
Badge #	60467
Division:	ITC - Services COA
Department:	ITC - Services Dept.
Phone #	60445
Email :	SHAnazi2@se.com.sa
Signature :	





## CONTRACTOR PERSONNEL TIMESHEET

Sector	IT and Communications	Org. Code Title	ITC Services Department	Contract No.	4400015677	Serv.Order #	
Department	IT Services Department	Org. Code Number	6021001	Contract Title	ITC MANPOWER CONTRACT		
Oper. Area	Western	Cost Object No.	606021001	Contractor Name	SAUDI BUSINESS MACHINES LIMITED (SBM)		
Vacation Days	30	Vacation Approved	0	Vacation Quota Balance			

Contractor's Employee		Item /Job Code No.	Job Title	Type	Month :		September												Year :		2022												Total Hours
ID Number	Name				9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27	9/28	9/29
2338858794	Shahid Zahoor	927	Applications Architect	Regular	8	X	X	8	8	8	8	X	X	8	8	8	8	8	X	X	8	8	8	H	X	8	8	8	8	X	160		
				Offshore																											0		
				Overtime																											0		
				Totals	8	0	0	8	8	8	8	8	0	0	8	8	8	8	8	0	0	8	8	8	0	0	0	8	8	0	160		

### NOTES:

- The Form is to be approved by Division Manager or Above.
- Fill the pre-approved overtime from the authorized person according to the Company Rules.
- Original Soft/Hard copy of the Form is accepted.
- Attach Medical report in case of Sick Leave along with approved sick leave form.
- Attach official report copy for (Marriage / Newborn / Death) with proof certification.
- Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

### Filling Instructions

■ Fill in Actual Working Hours only.

■ Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Shahid Zahoor
Title :	Applications Architect
Badge #	2338858794
Division:	IT Service Governance and Development Group
Department:	IT Services Department
Phone #	126537547
Email :	sszahoor@se.com.sa
Signature :	

Company Approval	
Name :	Mohammed A. AlSalmi
Title :	Division Manager
Badge #	85472
Division:	Assets Change Management Division
Department:	Operations Excellence & Resilience mgt. Department
Phone #	126538657
Email :	masalmi@se.com.sa
Signature :	

**SCHEDULE C**

Exhibit - I

Contract No. 4400015677  
 RFX No. \_\_\_\_\_

**CONTRACTOR PERSONNEL TIMESHEET**

Sector	ITC	Org. Code Title		Contract No.	4400015677	Serv.Order #	
Department	ITC Services Department	Org. Code Number		Contract Title	ITC MANPOWER CONTRACT		
Oper. Area	Central - Riyadh	Cost Object No.		Contractor Name	SAUDI BUSINESS MACHINES LIMITED (SBM)		
Vacation Days	30	Vacation Approved	0	Vacation Quota Balance	30		

Contractor's Employee		Item / Job Code No.	Job Title	Type	Month :		SEPTEMBER												Year :		2022										Total Hours	
					9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27	9/28
2169427230	Syad I. Zabih	1007	Engineering Aide B	Regular	8	X	X	8	8	8	8	8	X	X	8	8	8	8	8	X	X	8	8	8	H	X	X	V	V	V	V	120
				Offshore																											0	
				Overtime																											0	
				Totals	8	X	X	8	8	8	8	8	X	X	8	8	8	8	8	X	X	8	8	8	H	X	X	V	V	V	V	120

**NOTES:**

The Form is to be approved by Division Manager or Above.

Fill the pre-approved overtime from the authorized person according to the Company Rules.

Original Soft/Hard copy of the Form is accepted.

Attach Medical report in case of Sick Leave along with approved sick leave form.

Attach official report copy for (Marriage / Newborn / Death) with proof certification.

Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

**Filling Instructions**

Fill in Actual Working Hours only.

Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Syad I. Zabih
Title :	Engineering Aide B
Badge #	2169427230
Division:	ITC Department
Department:	ITC Services
Phone #	503289785
Email :	Syad@se.com.sa
Signature :	

Company Approval	
Name :	Mubarak F.Alshaibani
Title :	ITC Services Daepartment Manegeer
Badge #	60467
Division:	ITC Services Daepartment
Department:	ITC Services
Phone #	79461
Email :	MFShaibani@se.com.sa
Signature :	



### Application for ANNUAL VACATION / TRAVEL REQUEST Form

Date of Preparation:	<b>29/8/2022</b>	Service Order No.:	
Contractor Name:	IBS	Contract No.:	<b>4400015677</b>

#### Personnel Information

Employee Name:	Syed Ismail Zabhi	Emp. Badge No.:	<b>1007</b>
Nationality:	Indian	Phone# in KSA:	<b>502389785</b>
Phone# Out KSA:	0091 9849298742	E-mail:	<a href="mailto:tp-zabih@se.com.sa">tp-zabih@se.com.sa</a>
Division Name:	Telecom	Department Name:	<b>TELECOMMUNACTION</b>

#### Vacation Information

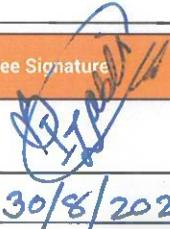
Vacation Days Credit	<b>30</b>	Requested No. of Days (Vacation)	<b>30</b>
Vacation Leave Without Pay	<b>0</b>	Balance (Leave Credit)	<b>0</b>
<b>TOTALS Vacation Days</b>		<b>30</b>	
Last Approved Vacation Start Date:		Return Date From Last Approved Vacation:	
Vacation Start Date :	<b>25/9/2022</b>	Vacation Finish Date :	<b>24/10/2022</b>
Last Day of Work :	<b>21/9/2022</b>	Return To Work Date:	<b>25/10/2022</b>

#### Travel Information

Travel FROM:	<b>RIYADH</b>	Travel TO:	<b>HYDERABAD</b>
Departure Date :	<b>25/9/2022</b>	Return Date :	<b>24/10/2022</b>
Airline Company:	<b>SAUDIA</b>	Ticket Price (SR):	<b>0.00</b>

An Economic Class Traveling Ticket As Per SEC COMPANY Actual Announced price.  
(Check The Ticket Price First Before Manager Approve)  
Attach A Copy of The Travel Agency /Airlines Bill.  
The Ticket Will Be Paid One Time In A Year

#### Reson For Travel : Annual Vacation

<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <b>Employee Signature</b>  <input style="width: 100%; height: 30px; border: none; font-size: 10px;" type="text"/> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <b>Signature</b>   </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <b>Date</b>  <del>30/8/2022</del> </div>	<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <b>Department Manager</b>  <input style="width: 100%; height: 30px; border: none; font-size: 10px;" type="text"/> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <b>Name</b> <input style="width: 100%; height: 30px; border: none; font-size: 10px;" type="text"/> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <b>Badge#</b> <input style="width: 100%; height: 30px; border: none; font-size: 10px;" type="text"/> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <b>Department</b> <input style="width: 100%; height: 30px; border: none; font-size: 10px;" type="text"/> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <b>Signature</b>  </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <b>Date</b> <input style="width: 100%; height: 30px; border: none; font-size: 10px;" type="text"/> </div>
---	--

## CONTRACTOR PERSONNEL TIMESHEET



Sector	ITC	Org. Code Title		Contract No.	4400015677	Serv.Order #	
Department	General Services	Org. Code Number		Contract Title			
Oper. Area	COA	Cost Object No.		Contractor Name	Saudi Business Machines Limited		
Vacation Days	30	Vacation Approved	0	Vacation Quota Balance	30		

Contractor's Employee		Item / Job Code No.	Job Title	Type	Month :		September												Year :		2022												Total Hours
ID Number	Name				9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27	9/28	9/29
2036640148	Abdullah Munir Nasser		Business Development Analyst	Regular	8	x	x	8	8	8	8	8	x	x	8	8	8	8	x	x	8	8	8	8	H	x	x	8	8	8	8	x	160
				Offshore																											0		
				Overtime																											0		
				Totals	8	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	8	8	0	0	8	8	8	160		

## NOTES:

The Form is to be approved by Division Manager or Above.

Fill the pre-approved overtime from the authorized person according to the Company Rules.

Original Soft/Hard copy of the Form is accepted.

Attach Medical report in case of Sick Leave along with approved sick leave form.

Attach official report copy for (Marriage / Newborn / Death) with proof certification.

Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

## Filling Instructions

Fill in Actual Working Hours only.

Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Abdullah M. Nasser
Title :	Business Development Analyst
Badge #	2036640148
Division:	Hybrid Automation
Department:	ITDT
Phone #	138585042
Email :	AMNasser2@se.com.sa
Signature :	

Company Approval	
Name :	Ahmed A. Al Saggaf
Title :	Hybrid Automation Division Manger
Badge #	85474
Division:	Hybrid Automation
Department:	ITDT
Phone #	126538623
Email :	AaSaggaf@se.com.sa
Signature :	

**SCHEDULE C**  
Exhibit - I

Contract No. 44000-----  
RFX No. \_\_\_\_\_



### CONTRACTOR PERSONNEL TIMESHEET

Sector	ITC	Org. Code Title		Contract No.	4400015677	Serv.Order #	
Department	Planning & Projects	Org. Code Number		Contract Title	ITC Manpower Supply Contract		
Oper. Area	Dammam - HQ	Cost Object No.		Contractor Name	SBM		
Vacation Days	30	Vacation Approved	0	Vacation Quota Balance	30		

Contractor's Employee		Item / Job Code No.	Job Title	Type	Month :		September												Year :		2022												Total Hours
ID Number	Name				9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27	9/28	9/29
Aisha N. Al-Buqami			Project Manager III	Regular	8	X	X	8	8	8	8	8	X	X	8	8	8	8	X	X	8	8	8	H	X	X	8	8	8	8	X	160	
				Offshore	0	X	X	0	0	0	0	0	X	X	0	0	0	0	X	X	0	0	0	0	0	X	X	0	0	0	0	0	0
				Overtime																												0	
				Totals	8	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	8	0	0	0	8	8	8	0	160	

**NOTES:**

The Form is to be approved by Division Manager or Above.  
 Fill the pre-approved overtime from the authorized person according to the Company Rules.  
 Original Soft/Hard copy of the Form is accepted.  
 Attach Medical report in case of Sick Leave along with approved sick leave form.  
 Attach official report copy for (Marriage / Newborn / Death) with proof certification.  
 Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

**Filling Instructions**

Fill in Actual Working Hours only.  
 Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

**Contractor's Employee**

Name :	Aisha N. Al-Buqami
Title :	Project Manager III
Badge #	1105282840
Division:	Project Execution
Department:	ITC Planning & Projects
Phone #	557371811
Email :	ANBuqami@se.com.sa
Signature :	

**Company Approval**

Name :	Abdullah M. Al-Talhah
Title :	Division Manager
Badge #	
Division:	Project Execution
Department:	ITC Planning & Projects
Phone #	013-8586262
Email :	AMTALHAH@se.com.sa
Signature :	

## SCHEDULE C

Exhibit - I

Contract No. 4400015677  
 RFX No. \_\_\_\_\_



## CONTRACTOR PERSONNEL TIMESHEET

Sector	ITC	Org. Code Title		Contract No.	4400015677	Serv.Order #	
Department	ITC Services Department	Org. Code Number		Contract Title	ITC MANPOWER CONTRACT		
Oper. Area	Central - Riyadh	Cost Object No.		Contractor Name	SAUDI BUSINESS MACHINES LIMITED (SBM)		
Vacation Days	30	Vacation Approved	0	Vacation Quota Balance	30		

Contractor's Employee		Item / Job Code No.	Job Title	Type	Month : September												Year : 2022												Total Hours			
ID Number	Name				9/1	9/2	9/3	9/4	9/5	9/6	9/7	9/8	9/9	9/10	9/11	9/12	9/13	9/14	9/15	9/16	9/17	9/18	9/19	9/20	9/21	9/22	9/23	9/24	9/25	9/26	9/27	9/28
2217366109	Osama Mohammed Wasim	927	Applications Architect	Regular	8	X	X	8	8	8	8	X	X	8	8	8	8	X	X	8	8	8	8	H	X	X	8	8	8	8	X	160
				Offshore																											0	
				Overtime																											0	
				Totals	8	0	0	8	8	8	8	8	0	0	8	8	8	8	0	0	8	8	8	8	0	0	0	8	8	8	0	160

## NOTES:

The Form is to be approved by Division Manager or Above.  
 Fill the pre-approved overtime from the authorized person according to the Company Rules.  
 Original Soft/Hard copy of the Form is accepted.  
 Attach Medical report in case of Sick Leave along with approved sick leave form.  
 Attach official report copy for (Marriage / Newborn / Death) with proof certification.  
 Any erasure/correction in the Form will render it invalid. (Except SEC authorized Personnel).

## Filling Instructions

Fill in Actual Working Hours only.

Highlight Weekends - Holidays - Saudi National Day.

Symbol	Represent
X	Weekends
H	Holidays
V	Vacations
L	Leave Without Pay
E	Emergency Leave
S	Sick Leave
M	Marriage
NB	Newborn
D	Death
Z	Leave Without Permission

Contractor's Employee	
Name :	Osama Wasim
Title :	Application Architect
Badge #	2217366109
Division:	IT Netwrok Security
Department:	IT Cyber Security Operations
Phone #	114086789
Email :	owmostaqeem@se.com.sa
Signature :	

Company Approval	
Name :	Mohammed S AlJahdli
Title :	Division Manager
Badge #	
Division:	IT Netwrok Security
Department:	IT Cyber Security Operations
Phone #	126537470
Email :	msjahdali@se.com.sa
Signature :	