Civil Service Form 48

#### DAILY TIME RECORD

GORNE, NELLO D.

For the month of November 1 - 30, 2021 Official hours for arrival and departure 8:00AM - 5:00PM

D	Τ.	AM	1	P <b>M</b>	TC/III	Total
Day	IN	OUT	IN	OUT	T/U	Total
1-MON	Als	VI	0 1	* 4		Absent
2-TUE	3:58	12:05	1:4	5:10		Absent
3-WED	7:5/	12:14	1:41	5:12		Absent
<b>4-</b> THU	8:10	12:02	17:58	8:15		Absent
5-FRI	8:00	12:15	1:17	5:21		Absent
6-SAT	1					Off
7-sun						Off
8-MON	\$ 0	111	A	4		Absent
9-TUE	8:10	17.08	1:11	5:04		Absent
10-WED	7:57	17:03	1:00	1:17		Absent
<b>11-</b> THU	8:00		12:53	5:03		Absent
12-FRI		12:07	1:00	5:15		Absent
13-SAT	6	1				Off
14-sun	12					Off
15-MON	8:00	12.06	1:40	5:10		Absent
16-TUE	3:59	12:02	12:58			Absent
17-WED	8:00	12:74	1:00	5:14		Absent
<b>18-</b> THU	256	1:02	1:00	5:10		Absent
19-FRI	8:00	12:04	1:00	5:20		Absent
20-SAT	1					Off
21-SUN						Off
22-MON	7:58	12.05	1:47	5.10		Absent
23-TUE	8:00		12:58	5:05		Absent
24-WED	8:00	b:05	1:68	5:10		Absent
25-THU	8:00	12:05	1:00	6:08		Absent
26-FRI	3:58		nisx			Absent
27-SAT	1	1				Off
28-SUN	10					Off
29-MON	8.00	17:05	1:00			Absent
30-TUE	H	0	V	1 5	Ky	Absent

I CERTIFY on my honor that the above is true and correct report of the hours of work performed record of which was made daily at the time of arrival at and departure from office.

NELLO D. GORNE

VERIFIED as to prescribed office hours

**ULYSSES A. CAGASAN** 

Department Head Department of Agronomy Civil Service Form 48

## DAILY TIME RECORD RATILLA, BERTA C.

For the month of November 1 - 30, 2021 Official hours for arrival and departure 8:00AM - 5:00PM

D		AM		PM		
Day	IN	OUT	IN	OUT	T/U	Total
1 NON	HOL	LIOAT	-		1	Absent
2+TUE	8:00	12:05	1:00	5:10		Absent
3WED	R:W	12:02	1:00	V:10		Absent
<b>4</b> -THU	8:00	12:05	1:11	V. 05		Absent
5 <del>FRU</del>	8:W	12:03	1:0	1.00		Absent
6 <del>s</del> at	Sat	1	,			Off
7sun	Dur					Off
8MOM	#10	L10;	47			Absent
9aur	0:00	12'05	7:00	1:20		Absent
10-WED)	8.00	12'00	1:00	1:25		Absent
117HU	G.W	12:05	1/:W			Absent
12FRII	P.W	1 R:00	1:0			Absent
13820	CO	V /	/			Off
148UN	0,0	4N				Off
15MON	8:W	12:0	1:00	5:10		Absent
16tue	R.W.	12:00	1:00	1.20		Absent
17weed	7:49	12:00	1:00	5:25		Absent
18-тни	18: W	1/2:03	1:10			Absent
19FRU	K:N	12:05	1:10	5:W		Absent
20sati	Co	A	1			Off
215UN	00	1/				Off
22100N	R:W	12:05	11:0	V: 85		Absent
<b>23</b> TUE:	8.00	12:07	1:00	1:10		Absent
24wedd	7:50	12:00	1:0	J.20		Absent
<b>25</b> THW	R: UY	1/2:05	1:0K	V:25		Absent
26HR1	8: N	12:05	1:00	5-20		Absent
27SAT	Ca	1/	,			Off
285UN	00	N		/		Off
29400M	R.W	12-10	1:00	500		Absent
30HUE	H	VIIOZ	X	1	l .	Alberent

I CERTIFY on my honor that the above is true and correct report of the hours of wor performed record of which was made daily at the time of arrival at and departure from

VERIFIED as to prescribed office hours

**ULYSSES A. CAGASAN** 

Department Head Department of Agronomy

Date Generated: Dec/01/2021 02:47:17

DAILY TIME RECORD CAGANDE, LOREME S.

For the month of November 1 - 30, 2021 Official hours for arrival and departure 8:00AM - 5:00PM

Don	AM		PM		T/U	Total
Day	IN	OUT	IN	OUT	1/0	10141
1-MON		Holid	au			Absent
2-TUE	7:53			5:02		Absent
3-WED	8:00		1:00			Absent
4-THU	7:56	12:00				Absent
5-FRI	7:55	12:05	12:52	5:06		Absent
6-SAT				-		Off
7-sun						Off
8-MON		Holic	laus			Absent
9-TUE	7:54	12:04	12:53	5:02		Absent
10-WED		12:03				Absent
11-тни		12:00	_			Absent
12-FRI	7:57	12:06	12:58	5:05		Absent
13-SAT						Off
14-SUN						Off
15-MON	7:55	12:00	12:57	5:07		Absent
16-TUE		12:05				Absent
17-WED	8:00	12:02	1:00	5:∞		Absent
<b>18-</b> THU		12:04				Absent
19-FRI	7:50	12:01	12:58	5:co		Absent
20-SAT						Off
21-SUN						Off
22-MON	7:52	12:00	12:54	5:05		Absent
23-TUE	7:56	12:06	12:56	5:04		Absent
24-WED	7:55	12:08	12:56	5:06		Absent
25-тни	8:00	12:03	1:00	5:00		Absent
26-FRI		12:02	_			Absent
27-SAT						Off
28-SUN						Off
29-MON	7:52	12:05	12:56	5:05		Absent
30-TUE		Holid				Absent

I CERTIFY on my honor that the above is true and correct report of the hours of work performed record of which was made daily at the time of arrival at and departure from office.

L. S. Cagande LOREME S. CAGANDE

VERIFIED as to prescribed office hours

**ULYSSES A. CAGASAN** 

Department Head Department of Agronomy Livil Service Form 48

### DAILY TIME RECORD ALCOBER, ED ALLAN L.

For the month of November 1 - 30, 2021 Official hours for arrival and departure 8:00AM - 5:00PM

Day	1	AM	]	PM	T/U	Total
Day	IN	OUT	IN	OUT	1/0	lotai
1-MON	H	oway				Absent
2-TUE	7:50	12:05	12:55	5:05		Absent
3-WED	7:55	12:00	12:50	5:10		Absent
<b>4-</b> THU	8:00	12:10	12:50	(:0)		Absent
5-FRI	7:50	12:05	12:0	5:05		Absent
6-SAT		at		122 224		Off
7-sun		Dun				Off
8-MON	H	OLIDAY	1			Absent
9-TUE	7:55	12:05	12:55			Absent
10-WED	8:00	12:00	1:00	0:10		Absent
<b>11-</b> THU	7:0	12:10	12:50	5:05		Absent
12-FRI	7:55	12:05	12:50	C:00		Absent
13-SAT		at				Off
14-SUN		<b>sun</b>				Off
15-MON	7:50	12:00	12:55	C:10		Absent
16-TUE	7:50	12:05	KIN	2:00		Absent
17-WED			12:55	20:05		Absent
<b>18-</b> THU	7:50	1230	12:50	C:00		Absent
19-FRI	7:53	12:05	12:50	CO		Absent
<b>20-</b> SAT		at				Off
21-SUN		>wn				Off
22-MON	7:58	12:00	1238			Absent
23-TUE	8:00	12:00	1:00	C:10	-	Absent
<b>24-</b> WED	7:50	12:05	12:55		-	Absent
<b>25-</b> THU	才公	12:05	12:57	20:00		Absent
26-FRI	7:58	12:00				Absent.
27-SAT		at				Off
28-SUN		Sun		1=		Off
29-MON		12:00	1:00	5:00		Absent
30-TUE	H	POLIDA	4			Absent

I CERTIFY on my honor that the above is true and correct report of the hours of wor performed record of which was made daily at the time of arrival at and departure from

ED ALLAN LALCOBER

VERIFIED as to prescribed office hours

**ULYSSES A. CAGASAN** 

Department Head Department of Agronomy Civil Service Form 48

## DAILY TIME RECORD ESCASINAS, RUTH O. (NAME)

For the month of November 1 - 30, 2021
Official hours for arrival and departure 8:00AM - 5:00PM

Dov		AM		PM	TE AT	
Day	IN	OUT	IN	OUT	T/U	Total
1-MON		Holic	lays 1th			Absent
2-TUE	8:10	12:00	120	5:N		A <del>bsen</del> t
3-WED	8:10	12:10	1:10	5:10		Absent
4-THU	81N	12:10	1:00	5:10		Absent
5-FRI	8:N		1:00	5:N		Absent
6-SAT		Salw	day			Off
7-sun		Sun	lah			Off
8-MON		Holio	lay			Absent
9-TUE	8:10	Rin	1:10	Jin		Absent
10-WED	8-10	12:10	in	5:10		Absent
<b>11-</b> THU	En	12:00	in	U=D		Absent
12-FRI	8:2	12:N	1:00	5:N		Absent
13-SAT		Salw	lan			Off
14-sun		buro				Off
15-MON	8.h	Zin	1:90	5:10		Absent
16-TUE	8:N	12:00		SIN		Absent
17-WED	8:N	12:00		5:N		Absent
18-THU	8:N	12:00	in	52W		Absent
19-FRI	8:n)	12:N	1:N	J:N		Absent
20-SAT		Satur	day			Off
21-SUN		bund	and			Off
22-MON	ein	12:n	In	Sin		Absent
23-TUE	8:D	1200	in	Sin		Absent
24-WED	e:n	12:10	1:1	CN		Absent
25-тни	8:n	12:10	1:00	JIN		Absent
26-FRI	8:N	12:N	1:00	5:00		Absent
27-SAT		Later	day			Off
28-SUN		frund	and			Off
29-MON	8:N	12:101	An	SIN		Absent
30-TUE		Hoe	day	, ,	-	Absent

I CERTIFY on my honor that the above is true and correct report of the hours of work performed record of which was made daily at the time of arrival at and departure from office.

RUTH O. ESCASINAS

VERIFIED as to prescribed office hours

**ULYSSES A. CAGASAN** 

Department Head Department of Agronomy

Date Generated: Dec/02/2021 02:38:26

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icial)

Stamp of Date of Receipt

# OR LEAVE

In case of Sick Leave: In Hospital (Specify Illness) Out Patient (Specify Illness) In case of Sick Leave: In Hospital (Specify Illness) Out Patient (Specify Illness) In case of Special Leave Benefits for Women: (Specify Illness) In case of Study Leave: Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave  D COMMUTATION Not Requested Requested Requested Requested Requested Reproval For disapproval due to  ULYSSES A. CAGASAN ILLAND Office/Dept./Unit (Authorized Officer)	RUTH OTAZA	j di Tagoy) Mahadaba
In case of Vacation/Special Privilege Leave: Within the Philippines Abroad (Specify) In case of Sick Leave: In Hospital (Specify Illness) Out Patient (Specify Illness) In case of Special Leave Benefits for Women: (Specify Illness)  In case of Study Leave: Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave  D COMMUTATION Not Requested Requested Requested Requested Requested White (Signature of Applicant)  N APPLICATION  B RECOMMENDATION For approval For disapproval due to  ULYSSES A. CAGASAN I Parky Office/Dept./Unit (Authorized Officer)	5. SALARY	Menoral III
In case of Vacation/Special Privilege Leave:  Within the Philippines  Abroad (Specify)  In case of Sick Leave:  In Hospital (Specify Illness)  Out Patient (Specify Illness)  In case of Special Leave Benefits for Women:  (Specify Illness)  In case of Study Leave:  Completion of Master's Degree  BAR/Board Examination Review  Other purpose:  Monetization of Leave Credits  Terminal Leave  S.D. COMMUTATION  Not Requested  Requested  Requested  Requested  Requested  White  (Signature of Applicant)  NAPPLICATION  To approval  For disapproval due to  ULYSSES A. CAGASAN II Auful  Office/Dept./Unit  (Authorized Officer)	LICATION	Seyll Contra
Within the Philippines Abroad (Specify)  In case of Sick Leave: In Hospital (Specify Illness) Out Patient (Specify Illness)  In case of Special Leave Benefits for Women: (Specify Illness)  In case of Study Leave: Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave  5.D COMMUTATION Not Requested Requested Requested Requested Requested Replicant)  NAPPLICATION  7.B RECOMMENDATION For approval For disapproval due to  ULYSSES A. CAGASAN ILLATION Office/Dept./Unit (Authorized Officer)	6.B DETAILS OF LEAVE	Danie M
Abroad (Specify)  In case of Sick Leave: In Hospital (Specify Illness) Out Patient (Specify Illness)  In case of Special Leave Benefits for Women: (Specify Illness)  In case of Study Leave: Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave 6.D COMMUTATION Not Requested Requested Requested Requested Recommendation For approval For disapproval due to  ULYSSES A. CAGASAN ILLATY Office/Dept.//Unit (Authorized Officer)	In case of Vacation/Special Privilege Leave	a rograe :
In case of Sick Leave: In Hospital (Specify Illness) Out Patient (Specify Illness)  In case of Special Leave Benefits for Women: (Specify Illness)  In case of Study Leave: Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave  6.D COMMUTATION Not Requested Requested Requested  (Signature of Applicant)  N APPLICATION  7.B RECOMMENDATION For approval For disapproval due to  ULYSSES A. CAGASAN // / / / / / Office/Dept./Unit (Authorized Officer)	Within the Philippines	A 17 M
In Hospital (Specify Illness) Out Patient (Specify Illness)  In case of Special Leave Benefits for Women: (Specify Illness)  In case of Study Leave: Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave 6.D COMMUTATION Not Requested Requested Requested Requested  White Purpose: (Signature of Applicant)  NAPPLICATION 7.B RECOMMENDATION For approval For disapproval due to  ULYSSES A. CAGASAN ILLUSTY Office/Dept./Unit (Authorized Officer)	Abroad (Specify)	
In case of Special Leave Benefits for Women: (Specify Illness)  In case of Study Leave: Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave 6.D COMMUTATION Not Requested Requested Requested (Signature of Applicant)  IN APPLICATION 7.B RECOMMENDATION For approval For disapproval due to  JULYSSES A. CAGASAN // // // // Office/Dept./Unit (Authorized Officer)	In case of Sick Leave:	
In case of Special Leave Benefits for Women: (Specify Illness)  In case of Study Leave: Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave 6.D COMMUTATION Not Requested Requested Requested (Signature of Applicant)  IN APPLICATION 7.B RECOMMENDATION For approval For disapproval due to  ULYSSES A. CAGASAN ILATAY Office/Dept./Unit (Authorized Officer)	In Hospital (Specify Illness)	Sin Luite
In case of Study Leave: Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave 6.D COMMUTATION Not Requested Requested Requested (Signature of Applicant)  ON APPLICATION For approval For disapproval due to  ULYSSES A. CAGASAN // /x// Office/Dept./Unit (Authorized Officer)	Out Patient (Specify Illness)	g (L. 14 p.) al man Modael I
In case of Study Leave: Completion of Master's Degree BAR/Board Examination Review Other purpose: Monetization of Leave Credits Terminal Leave 6.D COMMUTATION Not Requested Requested Requested (Signature of Applicant)  7.B RECOMMENDATION For approval For disapproval due to  ULYSSES A. CAGASAN // / / / Office/Dept./Unit	In case of Special Leave Benefits for Wome	n:
Completion of Master's Degree BAR/Board Examination Review  Other purpose:  Monetization of Leave Credits Terminal Leave  6.D COMMUTATION Not Requested Requested  (Signature of Applicant)  ON APPLICATION  For approval For disapproval due to  ULYSSES A. CAGASAN // /x// Office/Dept./Unit (Authorized Officer)	(Specify Illness)	I. Mac. P. s.
BAR/Board Examination Review  Other purpose:  Monetization of Leave Credits  Terminal Leave  6.D COMMUTATION  Not Requested  Requested  (Signature of Applicant)  ON APPLICATION  7.B RECOMMENDATION  For approval  For disapproval due to  ULYSSES A. CAGASAN // /ar/1/  Office/Dept./Unit  (Authorized Officer)	In case of Study Leave:	
BAR/Board Examination Review  Other purpose:  Monetization of Leave Credits  Terminal Leave  6.D COMMUTATION  Not Requested  Requested  (Signature of Applicant)  ON APPLICATION  7.B RECOMMENDATION  For approval  For disapproval due to  ULYSSES A. CAGASAN // /x///  Office/Dept./Unit  (Authorized Officer)	Completion of Master's Degree	
Monetization of Leave Credits Terminal Leave  6.D COMMUTATION Not Requested Requested (Signature of Applicant)  ON APPLICATION  7.B RECOMMENDATION For approval For disapproval due to  ULYSSES A. CAGASAN // /ar/1/ Office/Dept./Unit (Authorized Officer)	BAR/Board Examination Review	
Monetization of Leave Credits Terminal Leave  6.D COMMUTATION Not Requested Requested (Signature of Applicant)  7.B RECOMMENDATION For approval For disapproval due to  ULYSSES A. CAGASAN // /ar/1/ Office/Dept./Unit (Authorized Officer)	Other purpose:	
6.D COMMUTATION Not Requested Requested (Signature of Applicant)  7.B RECOMMENDATION For approval For disapproval due to  ULYSSES A. CAGASAN // /x/1/ Office/Dept./Unit (Authorized Officer)		
Not Requested  Requested  (Signature of Applicant)  ON APPLICATION  7.B RECOMMENDATION  For approval  For disapproval due to  ULYSSES A. CAGASAN // /x///  Office/Dept./Unit  (Authorized Officer)	Terminal Leave	
Requested  (Signature of Applicant)  ON APPLICATION  7.B RECOMMENDATION  For approval  For disapproval due to  ULYSSES A. CAGASAN // /ar/1/  Office/Dept./Unit  (Authorized Officer)	S.D COMMUTATION	T a constitution
(Signature of Applicant)  PN APPLICATION  7.B RECOMMENDATION  For approval  For disapproval due to	Not Requested	
PN APPLICATION  7.B RECOMMENDATION  For approval  For disapproval due to  ULYSSES A. CAGASAN // /ar/1/  Office/Dept./Unit  (Authorized Officer)	Requested Whivar	
7.B RECOMMENDATION  For approval  For disapproval due to  ULYSSES A. CAGASAN // /ar/1/  Office/Dept./Unit  (Authorized Officer)	(Signature of Applicant)	Sweet yours
For approval  For disapproval due to  ULYSSES A. CAGASAN // /2/ Office/Dept./Unit  (Authorized Officer)	N APPLICATION	Paken Te
For disapproval due to	7.B RECOMMENDATION	
Sulvases A. CAGASAN // /2/2/2/2/Office/Dept./Unit (Authorized Officer)	For approval	
(Authorized Officer)	For disapproval due to	6-de Utalian Talaharan
(Authorized Officer)	Martin	CIRCLE S
(Authorized Officer)	( VII VESES A CACASAN	11/21
(Authorized Officer)	Office/Dept./Unit	1/4/4
7.D DISAPPROVED DUE TO:		
7.D DISAPPROVED DUE TO:	Z D. DIGADDDOVED DUE TO	
	DISAPPROVED DUE TO:	