

DAILY TIME RECORD**FLANDEZ, ARLIN B.**

(NAME)

For the month of
September 1 - 30, 2022
 Official hours for arrival and departure
8:00AM - 5:00PM

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-THU	7:22	12:12	12:13	5:01		8hrs
2-FRI	7:15	12:19	12:21	5:01		8hrs
3-SAT						Off
4-SUN						Off
5-MON	7:24	12:21	12:23	5:02		8hrs
6-TUE	7:32	12:13	12:18	5:04		8hrs
7-WED	7:25	12:14	12:15	5:00		8hrs
8-THU	7:25	12:24	12:25	5:01		8hrs
9-FRI	7:25	12:17	12:18	5:01		8hrs
10-SAT						Off
11-SUN						Off
12-MON	7:26	12:04	12:05	5:02		8hrs
13-TUE	7:22	12:16	12:17	5:00		8hrs
14-WED						VL
15-THU	7:19	12:21	12:22	5:01		8hrs
16-FRI	7:17	12:26	12:28	5:00		8hrs
17-SAT						Off
18-SUN						Off
19-MON	7:15	12:17	12:18	5:00		8hrs
20-TUE	7:15	12:21	12:23	5:01		8hrs
21-WED	7:19	12:06	12:07	5:01		8hrs
22-THU	7:20	12:07	12:10	5:00		8hrs
23-FRI	7:09	12:06	12:08	5:00		8hrs
24-SAT						Off
25-SUN						Off
26-MON	7:19	12:22	12:24	5:00		8hrs
27-TUE	7:26	12:13	12:16	5:00		8hrs
28-WED	7:29	12:11	12:13	5:01		8hrs
29-THU	7:21	12:25	12:28	5:00		8hrs
30-FRI	7:26	12:06	12:08	5:00		8hrs

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.


ARLIN B. FLANDEZ

VERIFIED as to prescribed office hours


MARIA TERESA A. CRUZ

Department Head
 Internal Audit Service Office

Stamp of Date of Receipt



1

(First)

(Middle)

Arlin

Bravo

5. SALARY (Monthly)

Aide VI

PLICATION

6.b DETAILS OF LEAVE:

In case of vacation/Special Privilege leave:

☒ Within the Philippines : home☐ Abroad (Pls. Specify) :

In case of Sick leave:

☐ In Hospital (Pls. Specify) :☐ Out Patient (Pls. 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

☒ Requested ☐ Not Requested


FLANDEZ, ARLIN B.

(Signature of Applicant)

ON APPLICATION

7.b RECOMMENDATION:

☐ For Approval☐ For Disapproval due to:


MARIA TERESA A. CRUZ

Internal Audit Service Office

7.d DISAPPROVED due to:


E. TULIN

1 of
 (Signature)
 y President