ivil Service Form 48

## DAILY TIME RECORD CUSTODIO, IAN DAVE B.

For the month of January 1 - 31, 2024 Official hours for arrival and departure 8:00AM - 5:00PM

Day	AM		PM		TAI	Tetal
	IN	OUT	IN	OUT	T/U	Total
1-MON						Holiday
2-TUE						VL
3-WED						VL
4-THU	7:48	12:02	12:15	5:17		8hrs
5-FRI	8:00	12:05	12:28	5:30		8hrs
6-SAT						Off
7-sun						Off
8-MON	7:49	12:09	12:51	5:14		8hrs
9-TUE	7:50	12:06	12:55	5:18		8hrs
10-WED	7:58	12:02	12:11	5:17		8hrs
<b>11</b> -THU	7:56	12:11	12:21	5:05		8hrs
12-FRI						SL
13-SAT						Off
14-SUN						Off
15-MON	7:46	12:02	12:55	5:13		8hrs
16-TUE	7:48	12:01	12:56	5:03		8hrs
17-WED	7:54	12:00	12:07	5:09		8hrs
18-THU	7:51	12:02	12:07	5:04		8hrs
19-FRI	7:54	12:00	12:06	5:08		8hrs
20-SAT						Off
21-SUN •						Off
22-MON	7:54	12:51	12:59	5:08		8hrs
23-TUE	7:57	12:54	1:00	5:06		8hrs
24-WED	7:59	12:03	12:17	6:45		8hrs
<b>25-</b> THU	7:54	12:53	1:00	5:10		8hrs
26-FRI	7:56	12:47	12:58	5:30		8hrs
27-SAT						Off
28-SUN						Off
29-MON	7:51	12:00	12:11	5:13		8hrs
30-TUE	7:54	12:50	1:00	5:06		8hrs
31-WED	7:22	12:00	12:05	5:28		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.

IAN DAVE B. CUSTODIO

VERIFIED as to prescribed office hours

ZYRA MAY H. CENTINO

Department Head Department of Economics

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**FATE UNIVERSITY** 

Stamp of Date of Receipt

ybay City, Leyte

me and Signature) sity President

	(First)	(Middle)				
Ian Dave		Baco				
		5. SALARY (Monthly)				
truc	tor I					
OF A	APPLICATION					
	6.b DETAILS OF LEAVE:					
		n/Special Privilege leave: lippines : <u>Ormoc</u> pecify) :				
	In case of Sick leave: ☐ In Hospital (Pls. Specify) : ☐ Out Patient (Pls. Specify) :					
292)	In case of Special Leave Benefits for Women: (Specify Illness)					
	In case of Study leave:  ☐ BAR/Board Examination Review ☐ Completion of Master's Degree ☐ Completion of Doctorate Degree ☐ Completion of PHD Degree					
	Other purpose:  Monetization of Leave Credits Terminal Leave					
	6.d COMMUTATIO	)N				
	□ Requested	□ Not Requested				
	cu	USTODIO, IAN DAVE B.				
	(	Signature of Applicant)				
ΓΙΟΝ	ON APPLICATIO					
	7.b RECOMMEND.	ATION:				
7e	☑ For Approval					
=	□ For Disapproval due to:					
_		Consol				
	Department of Economics					
	7.d DISAPPROVED	due to:				
_						