

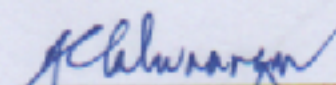
Civil Service Form 48

# **DAILY TIME RECORD** **CALUNANGAN, FE C.** (NAME)

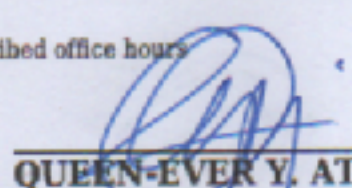
For the month of  
**August 1 - 31, 2022**  
Official hours for arrival and departure  
**8:00AM - 5:00PM**

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-MON						SL
2-TUE						SL
3-WED	7:49	12:08	12:09	5:04		8hrs
4-THU	7:45	12:02	12:04	5:01		8hrs
5-FRI	7:52	12:01	12:01	5:04		8hrs
6-SAT						Off
7-SUN						Off
8-MON	7:51	12:56	12:56	5:03		8hrs
9-TUE	8:05	12:05	12:06	5:03	5mins	7hrs 55mins
10-WED	7:59	12:07	12:07	5:03		8hrs
11-THU	8:01	12:27	12:28	5:28	1min	7hrs 59mins
12-FRI	7:35	12:28	12:30	5:08		8hrs
13-SAT						Off
14-SUN						Off
15-MON	8:09	12:48	12:49	5:05	9mins	7hrs 51mins
16-TUE	7:47	12:16	12:17	5:05		8hrs
17-WED	7:45	12:40	12:40	5:10		8hrs
18-THU	7:47	12:24	12:24	5:29		8hrs
19-FRI	7:49	12:48	12:48	5:18		8hrs
20-SAT		9:01	1:04	5:11		4hrs 7mins
21-SUN						Off
22-MON	7:49	12:01	12:04	5:36		8hrs
23-TUE	7:53	12:08	12:08	5:33		8hrs
24-WED	7:42	12:27	12:28	5:03		8hrs
25-THU	7:48	12:00	12:02	5:04		8hrs
26-FRI	7:56	12:34	12:35	5:08		8hrs
27-SAT						Off
28-SUN						Off
29-MON						Holiday
30-TUE	7:40	12:44	12:45	5:09		8hrs
31-WED	7:49	12:35	12:36	5:06		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.

  
**FE C. CALUNANGAN**

VERIFIED as to prescribed office hours

  
**QUEEN-EVER Y. ATUPAN**  
Department Head  
Office of the Cashier

S

SITY

Stamp of Date of Receipt

AVE

(Middle)
<b>Cruza</b>
5. SALARY (Monthly)

ION

DETAILS OF LEAVE:

Leave of vacation/Special Privilege leave:  
Within the Philippines :  
Abroad (Pls. Specify) :

Leave of Sick leave:  
Hospital (Pls. Specify) :  
Out Patient (Pls. Specify) : Sick Leave

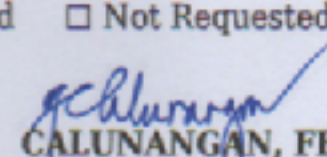
Leave of Special Leave Benefits for Women:  
(Specify Illness)

Leave of Study leave:  
BAR/Board Examination Review  
Completion of Master's Degree  
Completion of Doctorate Degree  
Completion of PHD Degree

Leave purpose:  
Monetization of Leave Credits  
Terminal Leave

COMMUTATION

Requested ☐ Not Requested

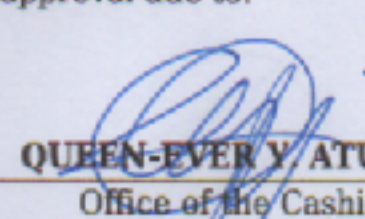
  
**CALUNANGAN, FE C.**  
(Signature of Applicant)

ICATION

COMMENDATION:

or Approval

or Disapproval due to:

  
**QUEEN-EVER Y. ATUPAN**  
Office of the Cashier

APPROVED due to: