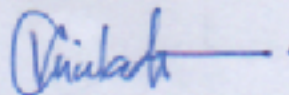


DAILY TIME RECORD **VALENZONA, VALERIE C.** (NAME)

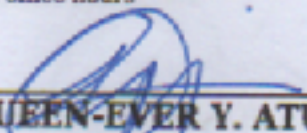
For the month of
November 1 - 30, 2022
 Official hours for arrival and departure
8:00AM - 5:00PM

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-TUE						Holiday
2-WED	8:00	12:05	12:06	5:09		8hrs
3-THU	7:24	12:13	12:14	8:14		8hrs
4-FRI	7:37	12:02	12:04	5:32		8hrs
5-SAT						Off
6-SUN						Off
7-MON	7:35	12:04	12:05	5:49		8hrs
8-TUE	7:41	12:06	12:07	5:41		8hrs
9-WED	7:19	12:01	12:03	5:14		8hrs
10-THU	7:33	12:03	12:05	7:22		8hrs
11-FRI	7:35	12:21				4hrs (VL half day)
12-SAT						Off
13-SUN						Off
14-MON	7:34	12:05	12:08	8:36		8hrs
15-TUE	7:31	12:02	12:03	7:50		8hrs
16-WED	7:40	12:00	1:00	6:15		8hrs
17-THU	7:50	12:04	12:07	8:05		8hrs
18-FRI	7:43	12:54	12:00	5:04	4hrs	12hrs SUSPENDED 12:00 pm 7:00 pm
19-SAT						Off
20-SUN						Off
21-MON						SL
22-TUE						SL
23-WED						VL
24-THU			1:00	7:21		4hrs (VL half day)
25-FRI	8:08	12:04	12:05	6:34	8mins	7hrs 52mins
26-SAT						Off
27-SUN						Off
28-MON						VL
29-TUE	7:47	12:04	12:05	6:30		8hrs
30-WED						Holiday

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.


VALERIE C. VALENZONA

VERIFIED as to prescribed office hours


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

Philippines

Stamp of Date of Receipt

UNIVERSITY

y, Leyte

FOR LEAVE

(First)

(Middle)

Valerie

Circulado

5. SALARY (Monthly)

Aide IV

APPLICATION

6.b DETAILS OF LEAVE:

In case of vacation/Special Privilege leave:

- ☐ Within the Philippines :
☐ Abroad (Pls. Specify) :

In case of Sick leave:

- ☐ In Hospital (Pls. Specify) :
☒ Out Patient (Pls. Specify) : **sick**

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 COMMUTATION

- ☒ Requested ☐ Not Requested


VALENZONA, VALERIE C.

(Signature of Applicant)

ON APPLICATION

7.b RECOMMENDATION:

- ☒ For Approval

- ☐ For Disapproval due to:


QUEEN-EVER Y. ATUPAN

Office of the Cashier

7.d DISAPPROVED due to:

TULIN

(Signature)
 President