

DAILY TIME RECORD **ARPOCEPLE, DAHLIA R.** (NAME)

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

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-WED	6:55	12:15	12:16	5:05		8hrs
2-THU	7:19	12:08	12:10	5:00		8hrs
3-FRI						SL
4-SAT						Off
5-SUN						Off
6-MON	7:11	12:08	12:09	5:09		8hrs
7-TUE	7:09	12:10	12:11	5:20		8hrs
8-WED	7:26	12:07	12:08	5:06		8hrs
9-THU	7:09	12:34	12:39	5:15		8hrs
10-FRI	7:17	12:01	12:50	5:01		8hrs
11-SAT						Off
12-SUN						Off
13-MON	7:31	12:33	12:34	5:10		8hrs
14-TUE	7:12	12:24	12:25	5:09		8hrs
15-WED	7:22	12:24	12:25	5:13		8hrs
16-THU	7:41	12:28	12:29	5:05		8hrs
17-FRI	7:13	11:53	1:00	5:08	7mins	7hrs 53mins
18-SAT						Off
19-SUN						Off
20-MON	7:38	12:12	12:13	5:16		8hrs
21-TUE	7:10	12:00	1:00	5:07		8hrs
22-WED	7:35	12:49	12:50	5:00		8hrs
23-THU	7:31	12:37	12:38	5:10		8hrs
24-FRI	7:18	12:04	12:06	5:05		8hrs
25-SAT						Off
26-SUN						Off
27-MON						SPL
28-TUE	7:45	12:36	12:37	5:16		8hrs
29-WED	7:16	12:12	12:14	5:07		8hrs
30-THU	7:17	12:36	12:37	5:17		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.

Wagay
DAHLIA R. ARPOCEPLE

VERIFIED as to prescribed office hours

f. H.
QUEEN-EVER Y. ATUPAN

Department Head
Office of the Cashier

Philippines
UNIVERSITY
Davao City, Leyte

Stamp of Date of Receipt

FOR LEAVE

(First)	(Middle)
ARPOCEPLE	DAHLIA RADO
Admin. Aide VI	5. SALARY 16,877.00

APPLICATION

6.B DETAILS OF LEAVE

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 _____

6.D COMMUTATION

Not Requested

Requested *Wagay*

DAHLIA R. ARPOCEPLE

(Signature of Applicant)

ON APPLICATION

7.B RECOMMENDATION

For approval

For disapproval due to _____

QUEEN-EVER Y. ATUPAN

(Authorized Officer)

7.D DISAPPROVED DUE TO:

TULIN
Official)