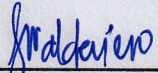


DAILY TIME RECORD
VALDEVIESO, LEILANI M.
(NAME)

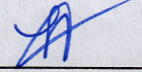
For the month of
January 1 - 31, 2022
Official hours for arrival and departure
8:00AM - 5:00PM

Day	AM		PM		T/U	Total
	IN	OUT	IN	OUT		
1-SAT	NEW YEAR'S DAY (HOLIDAY)				Off	
2-SUN	Sunday				Off	
3-MON	8:00	12:15	12:50	5:10	Absent	
4-TUE	8:05	12:10	12:55	5:10	Absent	
5-WED	8:05	12:10	12:40	5:10	Absent	
6-THU	8:10	12:10	12:55	5:05	Absent	
7-FRI	CAVAMITY LEAVE				Absent	
8-SAT	Saturday				Off	
9-SUN	Sunday				Off	
10-MON	CAVAMITY LEAVE				Absent	
11-TUE	8:05	12:00	12:50	5:10	Absent	
12-WED	CAVAMITY LEAVE				Absent	
13-THU	CAVAMITY LEAVE				Absent	
14-FRI	CAVAMITY LEAVE				Absent	
15-SAT	Saturday				Off	
16-SUN	Sunday				Off	
17-MON	8:05	12:10	12:55	5:10	Absent	
18-TUE	8:15	12:15	12:50	5:10	Absent	
19-WED	8:20	12:15	12:50	5:10	Absent	
20-THU	LEAVE				Absent	
21-FRI	LEAVE				Absent	
22-SAT	Saturday				Off	
23-SUN	Sunday				Off	
24-MON	8:05	12:10	12:50	5:05	Absent	
25-TUE	8:20	12:05	12:45	5:10	Absent	
26-WED	8:15	12:10	1:10	5:10	Absent	
27-THU	8:10	12:10	12:50	5:10	Absent	
28-FRI	8:05	12:10	12:50	5:05	Absent	
29-SAT	Saturday				Off	
30-SUN	Sunday				Off	
31-MON	LEAVE				Absent	

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.


LEILANI M. VALDEVIESO

VERIFIED as to prescribed office hours


LORINA A. GALVEZ
Department Head
Department of Food Science and Technology

Philippines
UNIVERSITY
by, Leyte

Stamp of Date of Receipt

OR LEAVE

(First)	(Middle)
VALDEVIESO	LEILANI MAZO
Administrative Aide I	5. SALARY

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

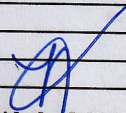

LEILANI M. VALDEVIESO
(Signature of Applicant)

ON APPLICATION

7.B RECOMMENDATION

For approval

For disapproval due to


LORINA A. GALVEZ
Office/Dept./Unit
(Authorized Officer)

D DISAPPROVED DUE TO:

IN

al)