Civil Service Form 48

DAILY TIME RECORD MIRAFLOR, MARIA ROBERTA S.

(NAME)

For the month of October 1 - 31, 2025
Official hours for arrival and departure 8:00AM - 5:00PM

| Day | AM | | PM | | nga ze r | m . 1 |
|----------------|------|-------|-------|------|---------------|------------|
| | IN | OUT | IN | OUT | T/U | Total |
| 1-WED | 7:39 | 12:02 | 12:03 | 5:33 | | 8hrs |
| 2-THU | 7:43 | 12:31 | 12:33 | 5:22 | | 8hrs |
| 3-FRI | 7:44 | 12:38 | 12:40 | 3:05 | 1hr 55mins | 6hrs 5mins |
| 4-SAT | | | | | | Off |
| 5-sun | | | | | | Off |
| 6-mon | 7:38 | 12:27 | 12:29 | 5:17 | | 8hrs |
| 7-TUE | 7:42 | 12:29 | 12:31 | 5:10 | | 8hrs |
| 8-WED | 7:26 | 12:29 | 12:31 | 5:22 | | 8hrs |
| 9-THU | 7:40 | 12:33 | 12:36 | 5:24 | | 8hrs |
| 10-FRI | 7:43 | 12:41 | 12:44 | 5:10 | | 8hrs |
| 11-SAT | | | | | | Off |
| 12-SUN | | | | | | Off |
| 13-MON | 7:41 | 12:29 | 12:31 | 5:10 | | 8hrs |
| 14-TUE | 7:51 | 12:30 | 12:32 | 5:10 | | 8hrs |
| 15-WED | 7:43 | 12:32 | 12:33 | 5:08 | | 8hrs |
| 16 -THU | 7:47 | 12:06 | 12:08 | 5:13 | | 8hrs |
| 17-FRI | 7:43 | 12:22 | 12:24 | 5:12 | | 8hrs |
| 18-SAT | | | | | | Off |
| 19-SUN | | | | | | Off |
| 20-MON | | | | | | Holiday |
| 21-TUE | 7:47 | 12:31 | 12:34 | 5:14 | | 8hrs |
| 22-WED | 7:34 | 12:25 | 12:28 | 5:03 | | 8hrs |
| 23-THU | 7:38 | 12:01 | 12:04 | 5:44 | | 8hrs |
| 24-FRI | 7:44 | 12:52 | 12:54 | 5:31 | | 8hrs |
| 25-SAT | | | | | | Off |
| 26-sun | | | | | | Off |
| 27-MON | 7:03 | 12:35 | 12:38 | 5:11 | | 8hrs |
| 28-TUE | 7:42 | 12:33 | 12:34 | 5:26 | | 8hrs |
| 29-WED | | | | | | ОВ |
| 30 -THU | 7:33 | 12:16 | 12:27 | 5:56 | | 8hrs |
| 31-FRI | | | | | | 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.

MARIA ROBERTA S. MIRAFLOR

VERIFIED as to prescribed office hours

RYSAN C. GUINOCOR

Department Head Administrative Services Office

DAILY TIME RECORD MIRAFLOR, MARIA ROBERTA S.

(NAME)

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| 30 -THU | 7:33 | 12:16 | 12:27 | 5:56 | | 8hrs |
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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.

MARIA ROBERTA S. MIRAFLOR

VERIFIED as to prescribed office hours

RYSAN C. GUINOCOR

Department Head Administrative Services Office