**Semana de: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Departamento: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Nombre  | Lunes | Martes | Miercoles | Jueves | Viernes | Sabado | Domingo | Firma |
| EN |  |  |  |  |  |  |  |  |
| AFUERA |  |  |  |  |  |  |  |  |
| TOTAL |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Nombre | Lunes | Martes | Miercoles | Jueves | Viernes | Sabado | Domingo | Firma |
| EN |  |  |  |  |  |  |  |  |
| AFUERA |  |  |  |  |  |  |  |  |
| TOTAL |  |  |  |  |  |  |  |  |

Certifico que las horas anteriores que se muestran aquí representan con precisión las horas que trabajé durante este período de pago.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Firma de Supervisor Fecha