



Republic of the Philippines
House of Representatives
Quezon City, Metro Manila

INDIVIDUAL CERTIFICATE OF SERVICE

For the period _____

This is to certify that the undersigned employee of (_____)
has performed the assigned tasks and official duties during the period stated above.

Name of Employee	Position	Signature	Days Absent (Without Approved Leave of Absence)

Noted by:

(Signature over Printed Name)
Director II/ Head of Office