ATTENDANCE RECORD

LAST NAME	FIRST NAME	MIDDLE INITIAL
EMPLOYEE/CLOCK NO.	DEPARTMENT	HIRE DATE
SICK DAYS DUE	VACATION DAYS DUE	TELEPHONE NO.

A - ACCIDENT ON JOB
B - BEREAVEMENT
E - EXCUSED
F - FAMILY/MEDICAL LEAVE
H - HOLIDAY
I - ILLNESS SELF
J - JURY DUTY
L - LEAVE OF ABSENCE
M - MILITARY
O - OTHER
P - PERSONAL
Q - LATENESS/EARLY QUIT
S - SUSPENSION
U - UNEXCUSED
V - VACATION
W - WEATHER
X - ACCIDENT OFF JOB

YEAR _____

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	SUMMARY H	V	B	I	A	J	F	Q	E	U	O
JAN																																										
FEB																																										
MAR																																										
APR																																										
MAY																																										
JUN																																										
JUL																																										
AUG																																										
SEP																																										
OCT																																										
NOV																																										
DEC																																										
TOTALS																																										

NOTE: DOTTED LINE INDICATES HALF DAY.

CROWNMAX SAMPLE

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