



**GOVERNMENT OF THE VIRGIN ISLANDS OF THE UNITED STATES**  
**TIME AND ATTENDANCE RECORD FOR**  
**PER DIEM PAYMENT**



Pay Period Ending \_\_\_\_\_

Island Code \_\_\_\_\_

Dept/Agency \_\_\_\_\_

Date \_\_\_\_\_

DILOG ACCOUNT CODES ERP CODE		
ORG	OBJ	PROJ

Employee Number	Employee Name	Total Hours PTOSJ	Hourly Rate

Verify by: \_\_\_\_\_

No. of Employees  Total Hours

Certified by: \_\_\_\_\_

Date: \_\_\_\_\_

"I hereby certify that all time entries in this report represent a true statement of work hours for the employees of this Department. I therefore authorize the Department of Finance to compute and pay the total cost of the payroll making the charge of the appropriate Appropriation of Fund Account to this Agency as indicated in this record."

\_\_\_\_\_  
Certifying Officer