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| **CONTRATO Nº** | **FISCAL RESPONSÁVEL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Mês / Ano** | | | | |
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| **Quantidade de terceirizados:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **LISTA DE VERIFICAÇÃO DE POSTOS OU ÁREAS OCUPADAS PELOS TERCEIRIZADOS "ATIVOS"** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | DIA DO MÊS (P = Presente / F = Folga / A = Ausente / R = Reposto) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Nome Completo** | | **Nome do Posto** | **01** | **02** | **03** | **04** | **05** | **06** | **07** | **08** | **09** | **10** | **11** | **12** | **13** | **14** | **15** | **16** | **17** | **18** | **19** | **20** | **21** | **22** | **23** | **24** | **25** | **26** | **27** | **28** | | **29** | **30** | **31** | **Observações** |
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| **Informações adicionais** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| O expediente de todos os terceirizados é: **07:30** às **17:30** de segunda à quinta e **07:30** às **16:30** na sexta-feira. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |