# D./Dª.       en calidad de

# CERTIFICA: Que durante el mes de       de 20   el personal que a continuación se relaciona ha prestado servicios en sábados, domingos, festivos y jornada normal de trabajo:

|  |  |  |  |  |  |
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| **APELLIDOS Y NOMBRE**: | **ACUERDO ANTERIOR AL CONVENIO** | **ART. 58.1** | **ART. 58.2** | **ART. 58.3** | **ACUERDO 16/05/2018 MEJORA PERSONAL MEDIOS AUDIVISUALES** |
|  |  | SÁBADO MAÑANA | SÁBADO TARDE O DOMINGO **SIN** DÍA LIBRE | JORNADA NORMAL SÁBADO-DOMINGO | DÍA FESTIVO | DÍA FESTIVO |
|  | SÁBADO TARDE-DOMINGO | **CON** DÍA LIBRE | **SIN** DÍA LIBRE |  |  | **CON** DÍA LIBRE | **SIN** DÍA LIBRE | CON DÍA LIBRE |
|  | 75,03 € | 35,61 € | 71,24 € | 85,52 € | 35,61 € | 35,61 € | 85,52 € | 75,09 € |
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 Vº. Bº. En Granada, a    de       de 20  .

 LA GERENTE,