

Report of Daily Hours Worked

Period Ending May 12, 2012

Employee _____
(PLEASE PRINT FULL LEGAL NAME)

Employee ID# _____
(DO NOT USE SOCIAL SECURITY NUMBER)

Department _____
(PLEASE PRINT)

Position Title _____

Position Code _____

		SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	Regular Hours	Over 40 Hours
Week Of:	04/21/12	15	16	17	18	19	20	21		
	INS									
	OUTS									
	LEAVE									
	Total									
Grand Total Hours										
Week Of:	04/28/12	22	23	24	25	26	27	28		
	INS									
	OUTS									
	LEAVE									
	Total									
Grand Total Hours										
Week Of:	05/05/12	29	30	1	2	3	4	5		
	INS									
	OUTS									
	LEAVE									
	Total		PAY DAY							
Grand Total Hours										
Week Of:	05/12/12	6	7	8	9	10	11	12		
	INS									
	OUTS									
	LEAVE									
	Total									
Grand Total Hours										

I VERIFY THAT I HAVE REPORTED ALL HOURS WORKED AND THAT THE HOURS REPORTED ABOVE ARE ACCURATE.

TOTAL HOURS

RECORD OF LEAVE HOURS	
SICK LEAVE	_____
PERSONAL LEAVE	_____
LWOP	_____
OTHER	_____

FOR PAYROLL USE ONLY	
Regular Hours	_____
OT Hours	_____
Total Hours	_____
Total Hours Worked	_____

Employee Signature

Date

Supervisor Signature

Date

Supervisor Print Name

*Both Employee AND Supervisor MUST sign AND date the time sheet prior to turning in to Payroll Department.