

Time and Leave Reporting

Employee Name:

Circle:

Status

Extra Help

Employee E-Number:

Time Sheet Period:

12/25/2006

Work Dept - Name/Org:

Submit by Date:

12/22/2006

Earning	Shift	Total Hours	M	T	W	TH	F	S	SU	M	T	W	TH	F	S	SU
Regular Hours (050)																
Compensatory Time Used (700)																
Vacation Taken (710)																
Sick Leave Taken (720)																
Family Sick Leave Taken (721)																
Bereavement Leave (770)																
Holiday Hours (760)																
Dock Pay (010)																
Overtime - 1.5 X (061)																
Overtime - 2.0 X (062)																
Compensatory Time Earned 1.5 X (751)																
Compensatory Time Earned 2.0 X (752)																
Holiday Worked 1.5 X (091)																
Holiday Worked 2.0 X (092)																
Holiday on Day Off (090) (Circle) Reg 1 1/2 X, 2X Class Upgrade (080)																
Temporary Ex Help Regular Hours (900)																
Temporary Ex 1.5 X OT (950)																

Submitted for Approval By: (Employee Signature) _____

Approved By: (Employee Supervisor) _____

Approved By: (Fiscal Agent, if required) _____

Notes: