

FY08 EMPLOYEE TIME REPORTING WORKSHEET

Organization or Department Name: _____
 Name: _____
 Employee Signature: _____

Pay Period: **0722**
 From: **9/30/07** Supervisor Signature: _____
 Through: **10/13/07** Timekeeper Signature (Optional): _____

	WEEK 1							WEEK TOTAL	WEEK 2							WEEK TOTAL	PAY PERIOD TOTAL	ACCOUNT CODE	ABC ACTIVITY CODE
	SUN 9/30	MON 10/1	TUE 10/2	WED 10/3	THU 10/4	FRI 10/5	SAT 10/6		SUN 10/7	MON 10/8	TUE 10/9	WED 10/10	THU 10/11	FRI 10/12	SAT 10/13				
Work Schedule							0.00								0.00	0.00			
PAY CODE							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
							0.00								0.00	0.00			
Total Hours	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
DATE	9/30	10/1	10/2	10/3	10/4	10/5	10/6	Time	10/7	10/8	10/9	10/10	10/11	10/12	10/13	Time	NOTES:		
Record								From								From			
Leave								To								To			
Record								From								From			
Comp Time Earned								To								To			
Record								From								From			
Credit Hours Earned								To								To			
Record								From								From			
Overtime								To								To			
INITIALS																			