Employee Time Record	Project Name	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	TOTAL
	EDUCATION/SEMINAR (PAID)															
	FUNERAL LEAVE (PAID)															
	SICK LEAVE (Salaried only)															
	PERSONAL DAY (PAID)															
	VACATION (PAID)															
	HOLIDAY (PAID)															
	JURY DUTY/MILITARY (UNPAID)															
	LEAVE OF ABSENCE (UNPAID)															
	TOTALS															
	FOR ACCOUNTING USE ONLY	*REGULAR*		*OVERTIME*		*DBLTIME*		*HOLIDAY*		*VACATION*		*SICK LEAVE*		*OTHER*		*TOTAL*

Left side vertical labels: DEPT. | CLOCK NUMBER | EMPLOYEE NAME (please print) | SUPERVISOR SIGNATURE | EMPLOYEE SIGNATURE | PAY PERIOD ENDING | PAY PERIOD BEGINNING

Please do not simply "check" boxes. Provide actual hours worked, rounded to the nearest ¼ hour (for example, 6.25 hrs, 6.5 hrs, 6.75 hrs).