Employee Name:	
Department:	

Employee #:	
Pay Period:	12/11/2011 to 12/24/2011

TIME WORKED					TIME OFF			EXT. SERVICE ONLY	
DAY	**DATE**	**PT HRS**	**OT HRS***	**COMP EARN***	**COMP USED**	**OTHER**		**DEPT. NUMBER**	**PAY RATE**
						CODE	**HRS**		
Sun	12/11/11								
Mon	12/12/11								
Tues	12/13/11								
Wed	12/14/11								
Thur	12/15/11								
Fri	12/16/11								
Sat	12/17/11								
Sun	12/18/11								
Mon	12/19/11								
Tues	12/20/11								
Wed	12/21/11								
Thur	12/22/11								
Fri	12/23/11								
Sat	12/24/11								
TOTAL PER CATI		0	***0***	***0***	0		0		

TOTAL HRS FOR PAY PERIOD

0

SIGNATURES

CODES

WC	Workmen's Comp	**LWP**	Leave Without Pay
CL	Court Leave	**ML**	Military Leave
EL	Education Leave	**BL**	Bereavement Leave

EMPLOYEE ***DATE***

DEPARTMENT HEAD ***DATE***

*** Enter hours as straight time - if hours meet qualification to be calculated at time and a half, then computer will make that entry.**