

CLASSIFIED CONTRACT SUPPLEMENTAL TIMESHEET

Legal Name
PLEASE PRINT

Last	First	Initial

Datatel ID #

School/Unit	Type of Service

Budget Number	Hours	Rate
TOTAL		

Contract Overtime

Other

(PLEASE CHECK MONTH)		YEAR: 			
<input type="radio"/> Jan	<input type="radio"/> Mar	<input type="radio"/> May	<input type="radio"/> Jul	<input type="radio"/> Sep	<input type="radio"/> Nov
<input type="radio"/> Feb	<input type="radio"/> Apr	<input type="radio"/> Jun	<input type="radio"/> Aug	<input checked="" type="radio"/> Oct	<input type="radio"/> Dec

DATE	IN	OUT	IN	OUT	HRS WORKED	REMARKS:
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						

DO NOT USE RED INK
Timesheets are due in Payroll Office on the last working day of every month

TOTAL HOURS WORKED	
TOTAL DAYS WORKED	

SIGNATURES: Timesheets which have not been signed by both employee AND supervisor will be returned for signatures.

CERTIFICATION: We the undersigned certify that all entries are true and correct, and that lunch/dinner breaks are not included as hours worked (You may be held liable for incorrect entries).

Employee Signature

Date

Supervisor Signature

Date