

PAYROLL WEEK:

EMPLOYEE NAME: _____

FR (Saturday) _____ **TO (Friday)** _____

CK ISSUE DATE _____

LOCATION: (Check ONE)

Residential 500-40 1000	20	FIS 500-50 6000	FSS 500-55 5000	CSLA 500-60 7000	CSLA 500-60 7000	35
___ BARO	___ S Adams	___ D Hopkins	___ G Anderson	___ M Aldridge	___ L Hendrix-Minks	___ C Pusateri
___ BOND	___ S Bowling	___ N Jarboe	___ B Moorefield	___ G Allen	___ A Hett	___ R Reid
___ CHUR	___ T Brauning	___ R Kyle	___ T Page	___ J Alt	___ R Hinton	___ S Showacre
___ CHURB	___ K Chepko	___ D Manuel		___ P Baranauskus	___ K Hughes	___ MF Smith
___ GIST	___ P Corso	___ G Morningstar		___ A Benjamin	___ J Kang	___ S Spicer
___ GREE	___ A Dietrich	___ S Philips		___ A Boehl	___ P Kibler	___ D Stump
___ GREE2	___ P Dodd	___ C Pifer		___ H Coleman	___ J Knopfmacher	___ K Taylor
___ KWAN	___ T Eshelman	___ K Sullivan		___ J Derita	___ Charles Lee	___ K Tickler
___ MAYF	___ J Grubbs	___ J Walker		___ E Dix	___ Jamie Long	___ C VanCleve
___ MONO	___ E Holland	___ K Wolfe		___ A Dunn	___ I Loube	___ J Walters
___ MORN				___ F Evans	___ F Lund	___ S Young
___ PALM				___ S Hartig	___ D Mills	

	DATE	HOURS WORKED						OTHER (Ann, Sick,Pers,Hol)	TOTAL HOURS
		IN	OUT	IN	OUT	IN	OUT		
Saturday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P		
Sunday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P		
Monday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P		
Tuesday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P		
Wednesday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P		
Thursday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P		
Friday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P		
TOTAL WEEK 1									

Saturday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	
Sunday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	
Monday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	
Tuesday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	
Wednesday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	
Thursday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	
Friday		___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	___A ___P	
TOTAL WEEK 2								

SIGNATURE OF EMPLOYEE _____

DATE _____

APPROVED BY _____

DATE _____

FOR ACCOUNTING USE ONLY:

Regular _____
 Overtime _____
 Double Time _____
 Annual _____
 Personal _____
 Sick _____
 Other _____
TOTAL _____

TOTAL HRS _____