



EMPLOYEE TIME REPORT
 Recreation Temporary & Seasonal 2017

PAY PERIOD 21

Last Name				First Name				M.I.							Employee #	Period Ends 10/06/17
Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thur	Fri	Total		
9/23	9/24	9/25	9/26	9/27	9/28	9/29	9/30	10/1	10/2	10/3	10/4	10/5	10/6			
														Regular Hours	102	Hourly Rate
														Overtime	110	
														G/L#		
														G/L#		
														G/L#		
														G/L#		
														G/L#		
														G/L#		
														G/L#		
														G/L#		

															TOTALS
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Notes:			Hours Worked	
	I declare under the applicable penalties of law that to the best of my knowledge this information is correct			
Employee Signature		Authorized Signature		