

## UCSD CONTRACTING BI-WEEKLY TIME RECORD

**4/28/19-5/11/19**  
**Pay Period Dates**

**Demolder, Carl**  
**Last Name, First**

LIST HOURS WORKED - REGULAR AND OVERTIME

Index	<i>For OT, Indicate C- comp or P-</i>	SUN 4/28	MON 4/29	TUE 4/30	WED 5/1	THU 5/2	FRI 5/3	SAT 5/4	SUN 5/5	MON 5/6	TUE 5/7	WED 5/8	THU 5/9	FRI 5/10	SAT 5/11	Total
TODD COLEMAN	Reg. hours															
	OT: _____															
	Reg. hours															
	OT: _____															
	Reg. hours															
	OT: _____															
	Reg. hours															
	OT: _____															
	Reg. hours															
	OT: _____															
Total Hours Worked:																

*Carl Demolder*

Date: 5/11/19

Employee Signature

Date:

Supervisor/P.I. Signature

I certify that this report represents a reasonable estimate of the actual effort expended during the period reported.