

# UCSD CONTRACTING BI-WEEKLY TIME RECORD

**6/23/19-7/6/19**  
**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 6/23	MON 6/24	TUE 6/25	WED 6/26	THU 6/27	FRI 6/28	SAT 6/29	SUN 6/30	MON 7/1	TUE 7/2	WED 7/3	THU 7/4	FRI 7/5	SAT 7/6	Total
TODD COLEMAN	Reg. hours	5.50	5.50	2.50			2.50	3.50	5.00	4.50	2.50					31.50
	OT:_____															
	Reg. hours															
	OT:_____															
	Reg. hours															
	OT:_____															
	Reg. hours															
	OT:_____															
	Reg. hours															
	OT:_____															
Total Hours Worked:		5.50	5.50	2.50			2.50	3.50	5.00	4.50	2.50					31.50

*Carl Demolder*

Date: 7/6/19

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.