

## UCSD CONTRACTING BI-WEEKLY TIME RECORD

**2/3/19-2/16/19**  
**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 2/3	MON 2/4	TUE 2/5	WED 2/6	THU 2/7	FRI 2/8	SAT 2/9	SUN 2/10	MON 2/11	TUE 2/12	WED 2/13	THU 2/14	FRI 2/15	SAT 2/16	Total
TODD COLEMAN	Reg. hours	4.50	3.00	2.50												<b>10.00</b>
	OT: _____															
	Reg. hours															
	OT: _____															
	Reg. hours															
	OT: _____															
	Reg. hours															
	OT: _____															
	Reg. hours															
	OT: _____															
Total Hours Worked:		<b>4.50</b>	<b>3.00</b>	<b>2.50</b>												<b>10.00</b>

*Carl Demolder*

Date: 2/16/19

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.