TIME SHEET

TEST Washington UNI - STL - Medical Campus

INVOICE DATE:

None

TEST Evaluations Hr / Invoice Number 261551

Date	Job Title	Earn Code	Qty	Billing Rate	Amount
6/4/2023261551	ADMINISTRATIVE FEES	REG	20.0	15.0	300.0

Approving Manager: None Total Hours: 20.0 Total Amount: 300.0