

Hourly Timesheet

Name: Ishaq Sadiq Ali
 Employee ID: %169319 Rec #: 5
 Department: Computer Science & Engineering

Pay Period: 3/15/2024 to: 3/28/2024
 PP#: 2420
 Weekly Authorized Hours: 10.00
 Dept. ID: 0-2108-000

"Enter daily total hours to the nearest 1/4 hour. Round 7 minutes down, 8 minutes up."

Week Beginning:		03/15/24		Week Ending:		03/21/24		
Day	Dates	(Enter Times in XX:XX AM Format)						Total Daily Hours
		In	Out	In	Out	In	Out	
FRI	03/15/24							
SAT	03/16/24							
SUN	03/17/24							
MON	03/18/24	9:00 AM	11:00 AM					2.00
TUE	03/19/24	12:30 PM	5:00 PM					4.50
WED	03/20/24	2:00 PM	3:30 PM					1.50
THU	03/21/24	11:00 AM	1:00 PM					2.00
<p>*OVERAGE HOURS ARE THOSE OVER THE REGULAR (APPOINTMENT) HOURS. ONLY HOURS IN EXCESS OF 40 IN A WORKWEEK WILL BE COMPENSATED AT TIME AND HALF.</p> <p>HOURLY TEMPORARY EMPLOYEES ARE PAID ONLY FOR ACTUAL TIME WORKED.</p>								
Total Hours Worked								10.00
Regular Hours								10.00
Overtime Hours (*See note)								
Overtime Hours (*See note)								
Total Hours Paid								10.00

Week Beginning:		03/22/24		Week Ending:		03/28/24		
Day	Dates	(Enter Times in XX:XX AM Format)						Total Daily Hours
		In	Out	In	Out	In	Out	
FRI	03/22/24	11:00 AM	12:30 PM					1.50
SAT	03/23/24							
SUN	03/24/24							
MON	03/25/24	9:00 AM	11:00 AM					2.00
TUE	03/26/24	2:00 PM	5:00 PM					3.00
WED	03/27/24	2:00 PM	3:30 PM					1.50
THU	03/28/24	11:00 AM	1:00 PM					2.00
<p>*OVERAGE HOURS ARE THOSE OVER THE REGULAR (APPOINTMENT) HOURS. ONLY HOURS IN EXCESS OF 40 IN A WORKWEEK WILL BE COMPENSATED AT TIME AND HALF.</p> <p>HOURLY TEMPORARY EMPLOYEES ARE PAID ONLY FOR ACTUAL TIME WORKED.</p>								
Total Hours Worked								10.00
Regular Hours								10.00
Overtime Hours (*See note)								
Overtime Hours (*See note)								
Total Hours Paid								10.00

"I certify that the hours shown on this sheet are earned for pay purposes during the period indicated."

"I certify that the person named hereon is due the amounts shown for services performed during the period indicated and that these conform to leave policies."

Employee's Signature _____ Date _____

Supervisor's Signature _____ Date _____