UCSD CASPO - BI-WEEKLY TIME RECORD Dept: CASPO

11/5/17-11/18/17	
Pay Period Dates	

TIMESHEET DUE DATE: 11/17/17

Demolder, Carl Last Name, First

LIST HOURS WORKED - REGULAR AND OVERTIME

LIST HOURS WORKED - IN			LIST HOURS WORKED - REGULAR AND OVERTIME													
Index	*for OT, indicate C- comp or P-	SUN 11/5	MON 11/6	TUE 11/7	WED 11/8	THU 11/9	FRI HOL	SAT 11/11	SUN 11/12	MON 11/13	TUE 11/14	WED 11/15	THU 11/16	FRI 11/17	SAT 11/18	Total
CAP258R	Reg. hours			3.50	2.00	4.50					4.50		6.00	3.25		23.75
	OT:															
	Reg. hours															
	OT:															
	Reg. hours															
	OT:															
	Reg. hours															
	OT:															
	Reg. hours															
	OT:															
Total Hours Worked:				3.50	2.00	4.50					4.50		6.00	3.25		23.75
Paid Time Off: Sick Leave																
Paid Time Off: Vacation																
Paid Time Off: Holiday																
Misc. Leave: * *J-Jury Duty, N-No Pa																

Please Sign, Date & Return to: CASPO HR, Mail Code 0234, Fax 858.822.4379

Carl Demolder Date: 11/16/17	HR Offic	e Use Only:								
Employee Signature	Index	REG	SOT	POT	SICK	VAC	HOL	*	Recharge	
									Timekeep.	
Date:										
Supervisor/P.I. Signature										
I certify that this report represents a reasonable estimate of the actual effort expended										
during the period reported.										