## UCSD CASPO - BI-WEEKLY TIME RECORD Dept: CASPO

2/25/18-3/10/18	
Pay Period Dates	

TIMESHEET DUE DATE: 3/9/18

Demolder, Carl Last Name, First

Recharge

Timekeep.

LIST HOURS WORKED - REGULAR AND OVERTIME

Index	*for OT, indicate C- comp or P-	SUN 2/25	MON 2/26	TUE 2/27	WED 2/28	<b>THU</b> 3/1	FRI 3/2	<b>SAT</b> 3/3	SUN 3/4	<b>MON</b> 3/5	<b>TUE</b> 3/6	<b>WED</b> 3/7	THU 3/8	FRI 3/9	<b>SAT</b> 3/10	Total
CAPR1JV	Reg. hours			1.00		2.00	5.00	6.75	5.50	1.25	2.00		6.50	3.00	5.00	38.00
	OT:															
	Reg. hours															
	OT:															
	Reg. hours															
	OT:															
	Reg. hours															
	OT:															
	Reg. hours															
	OT:															
Total Hours Wor	ked:			1.00		2.00	5.00	6.75	5.50	1.25	2.00		6.50	3.00	5.00	38.00
Paid Time Off: Sick Leave	;															
Paid Time Off: Vacation																
Paid Time Off: Holiday																
Misc. Leave: * *J-Ju	ury Duty, <b>N</b> -No Pa															

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

during the period reported.

Carl Demolder	Date:	3/10/18	HR Office	Use Only:					
Employee Signature		_	Index	REG	SOT	POT	SICK	VAC	HOL
			CAPR1JV						
Levi Vamer	Date:	08/13/18							
Supervisor/P.I. Signature									
I certify that this report represents a reasonable esti	mate of the a	actual effort expended							