

Time Sheet

CSA# **CSA0000123388** Sub# **10751**

Brenda Loney

Site: Mengle Memorial Library

Supervisor: Darlene Marshall

(814) 265-0881

Phone: (814) 265-8245

Phone: (814) 265-8245

Example	1 Sat	2 Sun	3 Mon	4 Tue	5 Wed	6 Thu	7 Fri	8 Sat	9 Sun	10 Mon	11 Tue	12 Wed	13 Thu	14 Fri	15	16
1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>	1 <input type="checkbox"/>
2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>	2 <input type="checkbox"/>
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.5 <input checked="" type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>	.5 <input type="checkbox"/>
4.5			5	5	5			5		5	5					

Payroll Period: Start 12/03/2017 End 12/15/2017 Enter Total and In-Kind with only one decimal (Example 2.5). Grand Total: 30
Do not leave In-Kind blank! Write "0" if no In-Kind hours. In-Kind: 3

The undersigned hereby certify that the report is correct for the payroll period

Participant Signature Brenda Loney 12/15/2017 Site Supervisor Signature Darlene C. Marshall 12/12/2017

Completed timesheets can be either faxed or emailed to the number or address below.

OJE ☐ Training ☐

Fax to: 814-938-5301

Email to: lmccneilpage@pathstone.org

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USING SOMEONE ELSE'S TIME SHEET WILL CAUSE ERRORS FOR BOTH OF YOU.