Berkeley
Campus Shared Services
CSS MANUAL BI-WEEKLY TIMESHEET

revised 02/08/18

University of California, Berkeley • Campus Shared Services • 1608 4th Street • Berkeley, CA 94710 • Phone: (510) 664 - 9000, Option 3

EMPLOYEE NAME: _____ UCB EID: _____ BI WEEKLY PAY PERIOD:

TITLE: _____ DEPT: _____ FROM: _____ TO: _____

DATE	DAY OF WEEK	PAY CODE	HOURS	OTHER	START TIME	END TIME	TOTAL DAILY HOURS
TOTAL							

ACCOUNT INFORMATION

BU	ACCOUNT	FUND	DEPT ID (ORG CODE)	PROGRAM	CHARTFIELD1	CHARTFIELD2	%/HRS.
BU	ACCOUNT	FUND	DEPT ID (ORG CODE)	PROGRAM	CHARTFIELD1	CHARTFIELD2	%/HRS.
BU	ACCOUNT	FUND	DEPT ID (ORG CODE)	PROGRAM	CHARTFIELD1	CHARTFIELD2	%/HRS.
BU	ACCOUNT	FUND	DEPT ID (ORG CODE)	PROGRAM	CHARTFIELD1	CHARTFIELD2	%/HRS.
BU	ACCOUNT	FUND	DEPT ID (ORG CODE)	PROGRAM	CHARTFIELD1	CHARTFIELD2	%/HRS.

FOR OFFICE USE ONLY:

☐ Date Received

☐ Entered into PPS

☐ Audited

PPS PAY CODES:

CTO: COMP TIME OFF
LOA: LEAVE OF ABSENCE (UNPAID)
LOP: LEAVE WITHOUT PAY
PTO: PAID TIME OFF TAKEN
REG: REGULAR
SDF: SHIFT DIFFERENTIAL
SKX: SICK LEAVE TAKEN
VAX: VACATION LEAVE TAKEN

TOTAL %/HRS.

Employee's Signature: _____ Date: _____/_____/_____

Supervisor's Signature: _____ Date: _____/_____/_____

Updated 02/08/18

Please submit your timesheet to your Supervisor for approval.   Your Supervisor will submit your timesheet to csstimesheets@berkeley.edu.

Manual timesheet deadlines can be found at http://sharedservices.berkeley.edu/pdf/CSSCalendar-TimesheetDeadlines.pdf