

Hourly Timesheet

Name: Mirshokhid Okilbekov

Pay Period: 7/22/2022 to: 8/4/2022

PP#: 2303

Employee ID: %160866 Rec #: 0

Weekly Authorized Hours: 8.00

Department: Engineering Student Services

Dept. ID: 0-2114-000

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

Week Beginning:		07/22/22		Week Ending:		07/28/22			
Day	Dates	(Enter Times in XX:XX AM Format)						Total Daily Hours	Administrative Leave
		In	Out	In	Out	In	Out		
FRI	07/22/22	9:00 AM	12:00 PM					3.00	
SAT	07/23/22								
SUN	07/24/22								
MON	07/25/22	9:00 AM	12:00 PM					3.00	
TUE	07/26/22	11:00 AM	2:00 PM					3.00	
WED	07/27/22	9:00 AM	12:00 PM					3.00	
THU	07/28/22	9:00 AM	12:00 PM					3.00	
*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.								Total Hours Worked	15.00
								Regular Hours	8.00
								Overtime Hours (*See note)	7.00
								Overtime Hours (*See note)	
								Total Hours Paid	15.00

HOURLY TEMPORARY EMPLOYEES ARE PAID ONLY FOR ACTUAL TIME WORKED.

Week Beginning:		07/29/22		Week Ending:		08/04/22			
Day	Dates	(Enter Times in XX:XX AM Format)						Total Daily Hours	Administrative Leave
		In	Out	In	Out	In	Out		
FRI	07/29/22	9:00 AM	12:00 PM					3.00	
SAT	07/30/22								
SUN	07/31/22								
MON	08/01/22	9:00 AM	12:00 PM					3.00	
TUE	08/02/22	11:00 AM	2:00 PM					3.00	
WED	08/03/22	9:00 AM	12:00 PM					3.00	
THU	08/04/22	9:00 AM	12:00 PM					3.00	
*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.								Total Hours Worked	15.00
								Regular Hours	8.00
								Overtime Hours (*See note)	7.00
								Overtime Hours (*See note)	
								Total Hours Paid	15.00

HOURLY TEMPORARY EMPLOYEES ARE PAID ONLY FOR ACTUAL TIME WORKED.

"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 _____