



WILLIAM E. BOEING DEPARTMENT OF AERONAUTICS & ASTRONAUTICS  
UNIVERSITY of WASHINGTON

HOURLY TIME SHEET

\* (Write in pen) \*

Employee Name (print) <i>Alec Bueing</i>	Signature: <i>Alec Bueing</i>
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Approved by (Immediate supervisor)* <i>[Signature]</i>
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Month <i>September 2015</i>	Check WOT approved on reverse ← →	Month
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Date	Hours worked	Overtime**		Date	Hours worked	Overtime**
1	3			16		
2	2			17		
3	2			18		
4				19		
5				20		
6				21		
7				22		
8	4			23		
9	3			24		
10	3			25		
11				26		
12				27		
13				28		
14	4			29		
15	3			30		
				31		
TOTAL	24			TOTAL		

Office Use Only					
Budget	Pay Rate	PPE	Earn Type	Units/Hours	Calculation

Date Time Sheet Rcd
Date Hours Reported
Date Paid

Reviewed by: \_\_\_\_\_

\*DO NOT return a reviewed and signed time sheet to the employee. The supervisor is responsible for forwarding the completed form to the Payroll Coordinator.

\*\*Overtime work must be approved in advance by the supervisor by note in the space provided on the back of this form. UNAUTHORIZED overtime will not be compensated.

RETURN TO: DAVE ERICKSON  
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