

RESEARCH FOUNDATION HOURLY ATTENDANCE REPORT

NAME: _____

DEPARTMENT: _____

E-MAIL: _____

EXPENDITURE TYPE: GRADUATE UNDERGRADUATE REGULAR

PAY PERIOD DATES	
From:	_____
To:	_____

DAY	HOURS WORKED (ROUND TO NEAREST QUARTER HOUR)	PROJECT & AWARD # (P & A)* <small>*If all hours are paid from the same P & A, please use first line only</small>	
WEEK 1:			
SATURDAY		P:	A:
SUNDAY			
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
WEEK 2:			
SATURDAY		P:	A:
SUNDAY			
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			

SUMMARY	
WEEK 1 HOURS:	
WEEK 2 HOURS:	
REG. HOURS:	
OT HOURS:	
TOTAL HOURS:	

RF PAYROLL USE ONLY:	
RATE	TOTAL
\$	\$
\$	\$
TOTAL PAYMENT	\$

CERTIFICATION OF EMPLOYEE:

I certify that the above time and attendance information is true and complete to the best of my knowledge.

CERTIFICATION OF SUPERVISOR:

I confirm that the employee worked all of the above hours on the account noted. If the employee worked on multiple accounts, the distribution of hours is noted above.

Signature _____

Date _____

Signature _____

Date _____

**HOURLY TIMESHEETS MUST BE SUBMITTED THE TUESDAY FOLLOWING THE CLOSE OF THE PAY PERIOD TO:
RF HR/PAYROLL OFFICE, BIOTECHNOLOGY BUILDING, ROOM 1214**