

Print NAME (last name first)

PAYROLL TITLE

EMPLOYEE ID NUMBER

Overtime

Extra hours at straight time

Position #

BEGINNING MONTH

20

ENDING MONTH

20

Department

HOURS WORKED	DATE	TIME		TIME		TOTAL		DATE	TIME		TIME		TOTAL		DATE	TIME		TIME		TOTAL		
		In	Out	In	Out	Reg	OT		In	Out	In	Out	Reg	OT		In	Out	In	Out	Reg	OT	
	21							1							12							
	22							2							13							
	23							3							14							
	24							4							15							
	25							5							16							
	26							6							17							
	27							7							18							
	28							8							19							
29							9							20								
30							10							TOTAL HOURS								
31							11							Hourly Rate:								

EMPLOYEE certifies as true and correct

DATE

SUPERVISOR certifies as true and correct

DATE