

Temporary Employees Time Sheet

Banner Invoice # _____

Fund: _____

Worker's Name _____

Orgn: _____

ID # _____

Account #: _____

Department FSS Dean's Office

Prog. _____

Date	Time		Lunch		Summary of Work Done	Total Hours	Tot Hrs as Decimal	Rate	Amount
	In	Out	In	Out				\$252.00	(\$)
	9:15 AM	3:15 PM	1:15 PM	2:15 PM		5:00	5.00	\$252.00	\$1,260.00
	11:55 AM	6:55 PM	4:00 PM	5:00 PM		6:00	6.00	\$252.00	\$1,512.00
TOTAL							11.00	\$252.00	\$2,772.00

Bursary use only

Prepared by: Type Name Here **Approved by:** _____
Worker

Approved (HOS): _____

Checked by: Type Name Here **Date:** _____
Supervisor (Name)

Entered: _____

Supervisor (Signature)

Checked: _____

Date Checked: Type Date Here