

Adding Quality to Life

Last Name			First Name				M.I.							Employee #		Period Ends 03/11/16	
Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thur	Fri	Total			
2/27	2/28	2/29	3/1	3/2	3/3	3/4	3/5	3/6	3/7	3/8	3/9	3/10	3/11	TOLAI	J		
				0,1			0,0	0,0		0,0					Regular Hours	102	]
															Overtime	110	Hourly Rate
															G/L#		
															G/L#		
															G/L#		
															G/L#		
															G/L#		
															G/L#		
															G/L#		

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Notes:		Hours Worked	
	I declare under the applicable penalties of law that to the best of my knowledge this information is correct		
	Employee Signature	A	uthorized Signature