

PAY PERIOD 10

Adding Quality to Life

Last Name F				First Name				M.I.							Employee #		Period Ends 05/05/17
Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thur	Fri	Total			
4/22	4/23	4/24	4/25	4/26	4/27	4/28	4/29	4/30	5/1	5/2	5/3	5/4	5/5				
															Regular Hours	102	
															Overtime	110	Hourly Rate
															G/L#		
															G/L#		
															G/L#		
															G/L#		
															G/L#		
															G/L#		
															G/L#		
																	_
															TOTALS		
Notes:							ŀ						Worked				
						I declare under the applicable penalties of law that to the best of my knowledge this information is correct											
					Employee Signature										Authorized Signature		

2017