

**PAY PERIOD 23** 

Adding Quality to Life

Last Name Fi				First Name				M.I.							Employee #	Period Ends 11/02/18	
												ı					
Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thur	Fri	Total	J		
10/20	10/21	10/22	10/23	10/24	10/25	10/26	10/27	10/28	10/29	10/30	10/31	11/1	11/2		1.5		
															Regular Hours 102		
															Overtime 110	Hourly Rate	
															G/L#		
															G/L#		
															G/L#		
															G/L#		
															G/L#		
															G/L#		
															G/L#		
															TOTALS		
Notes:														Hours '	Worked		
					I declare under the applicable penalties of law that to the best of my knowledge this information is correct												
					Employee Signature										Authorized Signature		

2018