

PAY PERIOD 19 2019

Adding Quality to Life

Last Name				First Name				M.I.								Employee #	
					<u> </u>							<u> </u>					09/06/19
Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thur	Fri	Total	J		
8/24	8/25	8/26	8/27	8/28	8/29	8/30	8/31	9/1	9/2	9/3	9/4	9/5	9/6				Hourly Rate
														-	Regular Hours	102	
	l			ı				1									_
														-	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	Auth	norized Signature