

GJUESD EMPLOYEE OVERTIME (OVER 8 HOURS)/EXTRA TIME RECORD

PERIOD ENDING _____

copy on green

NAME: _____
POSITION: _____
LOCATION: _____

5 MIN = 0.08 15 MIN = 0.25 25 MIN = 0.42 35 MIN = 0.58 45 MIN = 0.75 55 MIN = 0.92
10 MIN = 0.17 20 MIN = 0.33 30 MIN = 0.50 40 MIN = 0.67 50 MIN = 0.83

THIS TIMESHEET MUST BE ACCOMPANIED BY AN APPROVED REQUISITION FOR PAYMENT

DATE	TIME IN	TIME OUT	HOURS WORKED	OFFICE USE ONLY	AESOP JOB ID #	COMMENTS:
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

*****PLEASE BE SURE TO SIGN YOUR TIMESHEET*****

EMPLOYEE SIGNATURE _____ **SUPERVISOR'S APPROVAL:** _____

OFFICE USE ONLY: _____ **HOURS:** _____
_____ **HRLY RATE:** _____
_____ **TOTAL:** _____
CODING: _____
CODING: _____
CODING: _____