

Salaried Employee Time Report

Month / Year _____



Employee Name _____

Cost Center/WBS _____

Personnel Number _____

Position _____

Weekly Work Hours _____

Day	Date	Reg Hours	Annual Leave	Sick Leave	Comp Taken	Other Non-Duty						Total	Sched Hours	Excess/Reduction	Comp Banked
						Code	Hours	Code	Hours	Code	Hours				
1															
2															
3															
4															
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31															

Absence Types [x=shift indicator (1,2,3)]			Attendance Types		
ACx Admin Close (Scheduled)	DHx Deferred Holiday	UAx Unpaid Absence	FML Family Medical Leave		
UACx Admin Close (Unscheduled)	HLx Holiday	VLx Voting Leave	WKCR Record Workers Comp		
ODAx Off Day Admin Close (Scheduled)	ODHx Off Day Holiday	ALPx Admin Lv w/pay			
FLx Bereavement Leave	MLx Military Leave	WKC Workers' Comp			
CLx Court Leave	PDx Personal Day				

- NOTE:** 1) Report all time in hours and hundrethhs or hours. 2) Use decimals rather than fractions. 3) This report should include absence and attendance hours only for this position. 4) Staff:hourly employees should account for all hours in the employee's normal work day and work week.

Employee Signature

Date

Departmental Approver

Date