



# Time Sheet and Payroll Adjustment Record

## Must be Submitted to Payroll Weekly

***Failure to submit this timesheet weekly,  
on or before the pay period deadline may result in a delay in receiving pay.***

Employee ID <b>REQUIRED</b>	Last Name	First Name	Location	Position Worked
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Record hours to the nearest  
Quarter Hour (.25)

S	M	T	W	Th	F	S

15 min = .25    45 min = .75  
30 min = .50    60 min = 1.00

Please indicate your Work Days\* for the time period covered  
by placing a ☒ checkmark on the days of the week above  
(\*used to determine if overtime is applicable)

Date	Activity Performed	Regular Hours	Overtime Hours	Date	Activity Performed	Regular Hours	Overtime Hours
				<b>Total Hours - - - - -</b>			

### PAYROLL ADJUSTMENTS (Shift Difference, Rate Difference):

Date	Description of Adjustments	Hours	Rate	Total Addition	Total Deduction
					( )
					( )
					( )

I certify that the above is an accurate record of time worked and adjustments during the period indicated.

Authorization: I hereby approve the hours and payroll adjustments indicated above for payment.

Employee Signature

Date

Supervisor Signature/ Budget Authority

Date

### RECAPITULATION

Hours	Account Code	Regular Rate @ \$	Overtime Rate @ \$	Approved Charges
<b>Timecard salary adjustment - - - - -</b>				<b>\$</b>