				Jacksonville Payroll ID: BW Pay Period:				State University I Payroll No: TO				Return NLT 12:00 Noon on Wednesday —				
Organization #:				Dept: _												
ID#:		_ NAME:														
	W	TH	F	S	S	М	Т	ТОТ	W	TH	F	S	S	М	Т	ТОТ
Hours Worked			•				•			• • • • • • • • • • • • • • • • • • • •	•				•	+ 101
Leave Taken																
Total Hours \ Overtime	Worked Hours															
Annual Leave																
Sick Leave								Emplo	yee Sig	nature:						
Comp Time																
Holiday/Other Total Hours																
ID#:		N/	ME.													
		_ '''														
	W	TH	F	S	S	M	T	TOT	W	TH	F	S	S	M	Т	TOT
Hours Worked Leave Taken																-
Leave Takeli																
Total Hours \	Worked															
Overtime																
Annual Leave																
Sick Leave							Emplo	oyee Sig	nature:							
Comp Time																
Holiday/Other Total Hours																
		•														

Approved by: _____ Date: ____