

FORM E: MONTHLY TIME SHEET

(To be completed by any individual, paid or volunteer, providing services to the project)

Agreement No:			Recipient:														_	Month:																	
Name:			Employer:																																
Activity (Task/ Subtask	C-Cash IL-Interlocal												Daily Work Log																			Total	Recipient Use		
No.)	IK-Other In- Kind	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Hours	Hourly Rate	Total Charge
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related or services w per day an INSTRU hourly rate hourly rate	CTIONS TO not), list the ac- ere Cash, Inte- d total each lin CFIONS TO to obtain the may be comp	tivit rloca ne. T) RI total uted	y and l Co lotal ECI chai usin	d, if sts, c hou PIE rge. ig the	projection in the second projection in the sec	ect-re-kind kind lould S: Fe er the	elated con corr or pre- ersion	d, the itribition of the control of	e tas ition ind to t-rela arge in Ho	k or s Er ted to per e ourly	sub-t iter t ploye costs, leme Rate	ask r he he ee's v mul ent or	numl ours work Itiply n For	device week the control of the contr	Indioted ek. tota	cate to the l.hou	if th nat ac urs b NOT	e etivit	y .		I cer as d	rtify lescr	that ibed	I ha rela	ve d tive	evote to th	ed th	ATU ne tim ove 1	ne re	port			in the pe	Date Date	nce of work

ECY 060-12 (4/10)

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