

DIOCESE OF BEAUMONT - TIMESHEET **MANUAL** 1. Employee Number: _____

2. Name: _____ 3. Pay Period: _____ 4. Check Date: _____
 5. Department: _____ Status: Non-exempt

DATE:	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	Box #	TOTAL HOURS
	Hours At Work								6
Vacation								7	
Personal								8	
Medical								9	
Holiday								10	
Jury Duty								11	
Bereavement Leave								12	
Unpaid Absence								13	

Total Hours (1st Week)									
HOURS IN #6 OVER 40								14	

DATE:	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	Box #	TOTAL HOURS
	Hours At Work								15
Vacation								16	
Personal								17	
Medical								18	
Holiday								19	
Jury Duty								20	
Bereavement Leave								21	
Unpaid Absence								22	

Total Hours (2nd Week)									
HOURS IN #15 OVER 40								23	

TOTAL HOURS (1st and 2nd Week)									
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I certify that this document is a true and correct account of my time and leave for the pay period indicated above.	Vacation Hrs Used (Submit Request For Leave Form)= #7 + #16	24
	Personal Hrs Used (Submit Request For Leave Form)= #8 + #17	25
	Medical Hrs Used (Submit Request For Leave Form)= #9 + #18	26
	Holiday Hrs Used = #10 + #19	27
	Jury Duty Hrs Used (Submit Request For Leave Form) = #11 + #20	28
	Bereavement Leave Used (Submit Request For Leave Form) = #12 + #21	29
	Unpaid Absence Leave Used = #13 + #22	30
Total Leave Hours = #24 through #29		31
Employee Signature _____ Date _____	Total Regular Hours = #6 + #15 + #31 - #14 - #23	
Supervisor Signature _____ Date _____	Total Overtime Hours = #14 + #23	

5/15/2002