

TIMESHEET: ADDITIONAL PAID TIME - MONTHLY EMPLOYEES

Name (last, first)	Department #:	Pay Period:
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Only one payment type per timecard	Payment Type: Overtime (attach required authorization form)							Bargaining Unit:	
	for straight time indicate OT5 in box above hours			for holiday OT indicate HG6 in box above hours					
			1	2	3	4	5	6	7
For Payroll Use Only:			8	9	10	11	12	13	14
			15	16	17	18	19	20	21
			22	23	24	25	26	27	28
			29	30	31			TOTAL =	

Employee Signature:		Supervisor Signature:
Date		Date

Only one payment type per timecard	Payment Type: Differential - Swing (SRE): 6pm-12am							Bargaining Unit:	
			1	2	3	4	5	6	7
For Payroll Use Only:			8	9	10	11	12	13	14
			15	16	17	18	19	20	21
			22	23	24	25	26	27	28
			29	30	31			TOTAL =	

Employee Signature:		Supervisor Signature:
Date		Date

Only one payment type per timecard	Payment Type: Graveyard (SRN): 12m-6am							Bargaining Unit:	
			1	2	3	4	5	6	7
For Payroll Use Only:			8	9	10	11	12	13	14
			15	16	17	18	19	20	21
			22	23	24	25	26	27	28
			29	30	31			TOTAL =	

Employee Signature:		Supervisor Signature:
Date		Date

