

Number _____

Employee Name _____

Exhibit R

EMPLOYEE TIME SHEET



Department _____

Pay Period From _____ to _____

| PAY CODE | SUN | MON | TUES | WED | THURS | FRI | SAT | SUN | MON | TUES | WED | THURS | FRI | SAT | Total |
|--------------------------------------|-----|-----|------|-----|-------|-----|-----|-----|-----|------|-----|-------|-----|-----|-------|
| Regular | | | | | | | | | | | | | | | |
| Overtime | | | | | | | | | | | | | | | |
| Comp | | | | | | | | | | | | | | | |
| Straight OT | | | | | | | | | | | | | | | |
| Comp | | | | | | | | | | | | | | | |
| Vacation | | | | | | | | | | | | | | | |
| Sick Leave | | | | | | | | | | | | | | | |
| Comp Time Used | | | | | | | | | | | | | | | |
| Call Outs | | | | | | | | | | | | | | | |
| OT / Comp | | | | | | | | | | | | | | | |
| Holiday | | | | | | | | | | | | | | | |
| Straight / Comp | | | | | | | | | | | | | | | |
| On Call | | | | | | | | | | | | | | | |
| Straight / Comp | | | | | | | | | | | | | | | |
| Police Warrants (Gross \$ Amount) | | | | | | | | | | | | | | | |
| Traffic School (Gross \$ Amount) | | | | | | | | | | | | | | | |
| Other (Please specify) | | | | | | | | | | | | | | | |
| Total | | | | | | | | | | | | | | | |

Employee Signature

Supervisor / Department Head Signature