|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| EMPLOYEE TIME SHEET – SALARY CDS FAMILY & BEHAVIORAL HEALTH SERVICES, INC. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pay Period: | | From: | | | 08/18/2024 | | | To: | | 08/31/2024 | | | Employee #: | | | | | | | | | |  | | | |
| Employee Name: | | | |  | | | | | | | | | Division: | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date | Sun | | Mon | | Tue | Wed | Thu | | Fri | | Sat | Sun | | | Mon | | | Tue | Wed | Thu | Fri | | | | Sat | Total |
| 08/18/24 | | 08/19/24 | | 08/20/24 | 08/21/24 | 08/22/24 | | 08/23/24 | | 08/24/24 | 08/25/24 | | | 08/26/24 | | | 08/27/24 | 08/28/24 | 08/29/24 | 08/30/24 | | | | 08/31/24 |
| Hours Worked |  | |  | |  |  |  | |  | |  |  | | |  | | |  |  |  |  | | | |  |  |
| Leave Taken |  | |  | |  |  |  | |  | |  |  | | |  | | |  |  |  |  | | | |  |  |
| Type of Leave |  | |  | |  |  |  | |  | |  |  | | |  | | |  |  |  |  | | | |  |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **I hereby certify that the above detailed hours are true and complete.** | | | | | | | | | | | | | |  | | Employee Status:  🞎 Full Time (40 Hours/Week)  🞎 ¾ Time (30 Hours/Week)  🞎 ½ Time (20 Hours/Week)  🞎 ¼ Time (10 Hours/Week)  🞎 Support Staff (Hours/Week Vary) | | | | | |  | | Total Hours | |  |
|  | | | | | | | | | | | | | |  | | | | |
| Employee Signature | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| Supervisor’s Signature | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Types of Leave: **S**=Sick Leave **V**=Vacation **PH**=Personal Holiday **F**=Funeral Leave **H**=Pay Holiday **A**=Administrative Leave **L/O**=Leave Without Pay | | | | | | | | | | | | | | | | | | | | | | | | | | |

# sl

Rev. 6/07 F-FD-10