

TIME REPORTING RECORD

In accordance with the Illinois State Official and Employee Ethics Act, each employee is required to report their time and attendance on a daily basis.

Please indicate the total number of hours worked per day (*excluding lunch*). Your signature certifies the accuracy of time reported.

Employee Name: \_\_\_\_\_ UID#: \_\_\_\_\_

	Mon	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
<i>(Example)</i> Date:	<i>6/1/2015</i>	<i>6/2/2015</i>	<i>6/3/2015</i>	<i>6/4/2015</i>	<i>6/5/2015</i>	<i>6/6/2015</i>	<i>6/7/2015</i>
Hours:	<i>7.5</i>	<i>8.15</i>	<i>7.0</i>	<i>7.0</i>	<i>9.0</i>	<i>0</i>	<i>0</i>
Leave Taken:							

	Mon	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
Date:							
Hours:							
Leave Taken:							

	Mon	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
Date:							
Hours:							
Leave Taken:							

	Mon	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
Date:							
Hours:							
Leave Taken:							

**\*\*There is no guarantee of processing for the current pay period.**

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_