# Time Report

| 1. Social Security Number | 2. Hired At | 3. Type of Employment ☐ Casual ☐ Regular Gov't Employee ☐ State ☒ Other: Sub-contractor |
|---|---|---|

| 4. Name *(First, Middle, Last)* | 5.Hiring Unit Name |
|---|---|
| 6. Mailing Address | 7. Phone Number |

| 8. City | 9. State | 10. Zip Code | 11. FAX Number N/A |
|---|---|---|---|
| 12. Emergency Contact Name | 13. Emergency Contact Phone Number | | 14. Emergency Contact Physical Address N/A |

| Column A | | Column B | | Column C | | Column D | |
|---|---|---|---|---|---|---|---|
| 1. Location Name | | 1. Location Name | | 1. Location Name | | 1. Location Name | |
| 2. Site Manager | | 2. Site Manager | | 2. Site Manager | | 2. Site Manager | |
| 3. Date | 4. Position | 3. Date | 4. Position | 3. Date | 4. Position | 3. Date | 4. Position |
| 5. AD Class N.A | 6.Rate $20.00 | 5. AD Class N/A | 6. AD Rate $ $20.00 | 5. AD Class N/A | 6. AD Rate $ $20.00 | 5. AD Class N/A | 6. AD Rate $ $20.00 |
| 7. Hiring Unit Accounting Code | | 7.Hiring Unit Accounting Code | | 7. Hiring Unit Accounting Code | | 7. Hiring Unit Accounting Code | |

8. Date and Time a. Year: _____

| Mo b. | Day c. | Start d. | Stop e. | Hours f. | Mo b. | Day c. | Start d. | Stop e. | Hours f. | Mo b. | Day c. | Start d. | Stop e. | Hours f. | Mo b. | Day c. | Start d. | Stop e. | Hours f. |
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| | | | Travel Hours | | | | | Travel Hours | | | | | Travel Hours | | | | | Travel Hours | |

| 9. Total Hours | | 9. Total Hours | | 9. Total Hours | | 9. Total Hours | |
|---|---|---|---|---|---|---|---|
| 10. Gross Amount *(item 6 x item 9)* | $ | 10. Gross Amount *(item 6 x item 9)* | $ | 10. Gross Amount *(item 6 x item 9)* | $ | 10. Gross Amount *(item 6 x item 9)* | $ |
| Site Manager Signature | | Site Manager Signature | | Site Manager Signature | | Site Manager Signature | |

| 11. Remarks | 12. Payment Office Only |
|---|---|
| | |
| | 14. Gross Earnings $ |

The signature below certifies the above item(s) are correct and proper for payment.

| 15. Sub-Contractor Signature | 16. Date | | |
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