

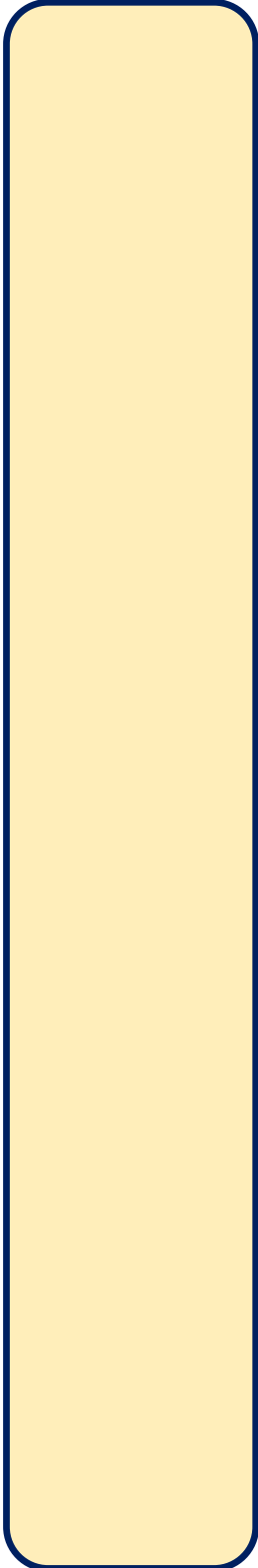
MUST RETURN 1ST DAY OF EACH MONTH TO PAYROLL DEPT.

Name _____

Employee ID _____

Month _____

<u>Date</u>	<u>Description Job #1</u>	<u>Hours Worked Job #1</u>	<u>Description Job #2</u>	<u>Hours Worked Job #2</u>	
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Signature _____

Date _____

revised: 1/30/2019