



Name _____ *Please print clearly*

Department _____

PLEASE RETURN TO PAYROLL BY THE END OF THE DAY ON THE LAST DAY OF THE MONTH!

According to WV state law, any work period over 6 hours must show a minimum 30 minute meal break.

If you are taking time off, it must be indicated with a V(vacation) or S(sick) and the number of hours taken

| Month | Date | Time Worked | | | | Hours Subtotal | Time Off | | | Total Hours |
|-------|------|-------------|----------|------------|----------|----------------------------|----------|---|-------|-------------|
| | | Start Time | End Time | Start Time | End Time | | V | S | Hours | |
| | 16 | | | | | | | | | |
| | 17 | | | | | | | | | |
| | 18 | | | | | | | | | |
| | 19 | | | | | | | | | |
| | 20 | | | | | | | | | |
| | 21 | | | | | | | | | |
| | 22 | | | | | | | | | |
| | 23 | | | | | | | | | |
| | 24 | | | | | | | | | |
| | 25 | | | | | | | | | |
| | 26 | | | | | | | | | |
| | 27 | | | | | | | | | |
| | 28 | | | | | | | | | |
| | 29 | | | | | | | | | |
| | 30 | | | | | | | | | |
| | 31 | | | | | | | | | |
| | | | | | | Total REGULAR Hrs. | | | | |
| | | | | | | Total VACATION Hrs. | | | | |
| | | | | | | Total SICK Hrs. | | | | |
| | | | | | | OTHER Hrs: | | | | |
| | | | | | | GRAND TOTAL HOURS | | | | |

This pay period WILL BE PAID ON THE 5th of the following month.

(If the 5th falls on a weekend or holiday, pay will be issued the business day prior)

Employee Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____