

Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: January 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
1						
2						
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4						
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11						
12						
13						
14						
15						
Totals						

Leave Codes:

A: Annual Leave H: Holiday FL: Funeral Leave PSL: Public School Leave
S: Sick Leave OL: Other Leave

Please document other leave: _____

I certify the above records of work and leave hours are true and correct.

Employee Signature: _____

Verification: _____

Director Signature: _____

Check Number: _____ Amount: _____ Check Date: _____

This time sheet must be completed in ink, do not use white-out. Your time sheet must be turned in before a check can be prepared. *Paid Leave Column and the Leave w/o Pay Column do not need to be totaled. Their purpose is only to inform the financial department of staff members taking leave days.

Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: January 31, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
16						
17						
18						
19						
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30						
31						
Totals						

Leave Codes:

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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: February 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Totals						

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Verification: _____

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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: February 29, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
16						
17						
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22						
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27						
28						
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Totals						

Leave Codes:

A: Annual Leave H: Holiday FL: Funeral Leave PSL: Public School Leave
 S: Sick Leave OL: Other Leave

Please document other leave: _____

I certify the above records of work and leave hours are true and correct.

Employee Signature: _____

Verification: _____

Director Signature: _____

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Washita Valley Community Action Council Time and Attendance

Employee Name: _____

Pay Period Ending: March 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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2						
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13						
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Totals						

Leave Codes:

A: Annual Leave H: Holiday FL: Funeral Leave PSL: Public School Leave
S: Sick Leave OL: Other Leave

Please document other leave: _____

I certify the above records of work and leave hours are true and correct.

Employee Signature: _____

Verification: _____

Director Signature: _____

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Washita Valley Community Action Council Time and Attendance

Employee Name: _____

Pay Period Ending: March 31, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: April 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Totals						

Leave Codes:

A: Annual Leave H: Holiday FL: Funeral Leave PSL: Public School Leave
S: Sick Leave OL: Other Leave

Please document other leave: _____

I certify the above records of work and leave hours are true and correct.

Employee Signature: _____

Verification: _____

Director Signature: _____

Check Number: _____ Amount: _____ Check Date: _____

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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: April 30, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Totals						

Leave Codes:

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S: Sick Leave OL: Other Leave

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Director Signature: _____

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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: May 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Totals						

Leave Codes:

A: Annual Leave H: Holiday FL: Funeral Leave PSL: Public School Leave
S: Sick Leave OL: Other Leave

Please document other leave: _____

I certify the above records of work and leave hours are true and correct.

Employee Signature: _____

Verification: _____

Director Signature: _____

Check Number: _____ Amount: _____ Check Date: _____

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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: May 31, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
16						
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Leave Codes:

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Washita Valley Community Action Council Time and Attendance

Employee Name: _____

Pay Period Ending: June 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
1						
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Totals						

Leave Codes:

A: Annual Leave H: Holiday FL: Funeral Leave PSL: Public School Leave
S: Sick Leave OL: Other Leave

Please document other leave: _____

I certify the above records of work and leave hours are true and correct.

Employee Signature: _____

Verification: _____

Director Signature: _____

Check Number: _____ Amount: _____ Check Date: _____

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Washita Valley Community Action Council Time and Attendance

Employee Name: _____

Pay Period Ending: June 30, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Totals						

Leave Codes:

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Verification: _____

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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: July 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Totals						

Leave Codes:

A: Annual Leave H: Holiday FL: Funeral Leave PSL: Public School Leave
S: Sick Leave OL: Other Leave

Please document other leave: _____

I certify the above records of work and leave hours are true and correct.

Employee Signature: _____

Verification: _____

Director Signature: _____

Check Number: _____ Amount: _____ Check Date: _____

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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: July 31, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: August 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Totals						

Leave Codes:

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Please document other leave: _____

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Verification: _____

Director Signature: _____

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Time and Attendance

Employee Name: _____

Pay Period Ending: August 31, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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S: Sick Leave OL: Other Leave

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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: September 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Washita Valley Community Action Council Time and Attendance

Employee Name: _____

Pay Period Ending: September 30, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
16						
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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: October 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
1						
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Totals						

Leave Codes:

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Verification: _____

Director Signature: _____

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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: October 31, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Totals						

Leave Codes:

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Director Signature: _____

Check Number: _____ Amount: _____ Check Date: _____

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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: November 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Washita Valley Community Action Council

Time and Attendance

Employee Name: _____

Pay Period Ending: December 15, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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Time and Attendance

Employee Name: _____

Pay Period Ending: December 30, 2012

Date	Program &/or Grant	Program &/or Grant	Program &/or Grant	Program &/or Grant	Paid Leave	Leave W/O Pay
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