

UNRECORDED TIME

NAME: _____ SS#: _____

DEPT. NAME: _____ DEPT #: _____

HOURS NOT REPORTED: _____ P/P ENDING: _____

GRADE: _____ RATE: _____ POSITION CODE: _____

EXPLANATION: _____

SUPERVISOR'S SIGNATURE: _____

**** INCOMPLETE CARDS SUBJECT TO OMISSION FROM PAYROLL ****

FOR LABOR OFFICE USE ONLY: NSF: _____ NOTE: _____ STD: _____

GROSS: _____ CHARGE: _____