

# JISAO – Hourly Time Report

Month \_\_\_\_\_ Year \_\_\_\_\_  
 Pay Period: 01-15 \_\_\_\_\_  
 16-end \_\_\_\_\_

Name \_\_\_\_\_ Job Title \_\_\_\_\_

Pay Rate \_\_\_\_\_ Budget to be charged \_\_\_\_\_

## Hours Worked (please record partial hours as decimals)

| Sun  |     | Mon  |     | Tues |     | Wed  |     | Thurs |     | Fri  |     | Sat  |     | Total |
|------|-----|------|-----|------|-----|------|-----|-------|-----|------|-----|------|-----|-------|
| Date | hrs | Date | hrs | Date | hrs | Date | hrs | Date  | hrs | Date | hrs | Date | hrs |       |
|      |     |      |     |      |     |      |     |       |     |      |     |      |     |       |
|      |     |      |     |      |     |      |     |       |     |      |     |      |     |       |
|      |     |      |     |      |     |      |     |       |     |      |     |      |     |       |
|      |     |      |     |      |     |      |     |       |     |      |     |      |     |       |

Total for semi-monthly pay period \_\_\_\_\_

This is a record of the hours worked which should be charged to the above budget.

\_\_\_\_\_  
 Employee's Signature

\_\_\_\_\_  
 Date

Approved by:

\_\_\_\_\_  
 UW Supervisor

\_\_\_\_\_  
 Date

Note: Time reports are due in the JISAO office on the 16<sup>th</sup> and on the first day of the following month. When those dates fall on a weekend, please submit your time report by the next working day. They may be faxed to the JISAO payroll coordinator.

*Joe Greer, payroll coordinator  
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