WFLHD Weekly Time Report

Use Account Number **1517PRJLEAV17-220.00.15V0.00-1700000000** for the following type of leave:

Annual Leave	Sick Leave	Compensatory Leave	Administrative Leave	Holiday Leave

Name: _____ Pay Period: 00

	PRMS	SUN	MON	TUE	WED	THU	FRI	SAT	SUB	SUN	MON	TUE	WED	THU	FRI	SAT	SUB	TOTAL
Acct Nos. (Project No, Task No, and Org)		First Week - Regular Hours							TOTAL	Second Week - Regular Hours							TOTAL	
Annual Leave																		
Sick Leave																		
Other																		

Name and Account Numbers	PRMS	Overtime/Comp Time Hours							SUB TOTAL	Overtime/Comp Time Hours							SUB TOTAL	TOTAL
First Week Total Overtime/Comp Time Hours										Overall Total Overtime/Comp Time Hours								
Total Hours																		

Employee Signature:	Date:	Supervisory Approval:

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