CLASSIFIED MONTHLY MULTI ASSIGNMENT/FUNDED TIMESHEET



| NAME:POSITION 1:POSITION 2: | | | | | MONTH: YEAR: Fiscal solutions through innovation, and come HOURS PER DAY: HOURS PER DAY: | | | | | |
|--|-----------------------|---------------------|--------------|------------------------------------|--|-------------------------|--|------|-------------|--|
| DATE | POS 1 HOURS WORKED | HOURS ABSENT | CODE | EXTRA HOURS | DATE | POS 2 HOURS WORKED | HOURS ABSENT | CODE | EXTRA HOURS | |
| 1 | WORKED | | | | 1 | WORKED | | | | |
| 2 | | | | | 2 | | | | | |
| 3 | | | | | 3 | | | | | |
| 4 | | | | | 4 | | | | | |
| 5 | | | | | 5 | | | | | |
| 6 | | | | | 6 | | | | | |
| 7 | | | | | 7 | | | | | |
| 8 | | | | | 8 | | | | | |
| 9 | | | | | 9 | | | | | |
| 10 | | | | | 10 | | | | | |
| 11 | | | | 1 | 11 | | | | + | |
| 12 | | | | 1 | 12 | | | | + | |
| 13 | | | | | 13 | | | | | |
| 14 15 | | | | | 14 15 | | | | + | |
| 16 | | | | | 16 | | | | + | |
| 17 | | | | | 17 | | | | | |
| 18 | | | | | 18 | | | | + | |
| 19 | | | | | 19 | | | | | |
| 20 | | | | | 20 | | | | | |
| 21 | | | | | 21 | | | | | |
| 22 | | | | | 22 | | | | | |
| 23 | | | | | 23 | | | | | |
| 24 | | | | | 24 | | | | | |
| 25 | | | | | 25 | | | | | |
| 26 | | | | | 26 | | | | | |
| 27 | | | | | 27 | | | | | |
| 28 | | | | | 28 | | | | | |
| 29 | | | | | 29 | | | | | |
| 30 | | | | | 30 | | | | | |
| 31 | | | | | 31 | | | | | |
| TOTALS | | | | | TOTALS | | | | | |
| SL Illness PNL Personal Necessity H Holiday WC Workers Comp RT Release Time BR Beravement (State Relationship) | | | | JD Jury Duty ML Maternity Leave | | | VA Vacation CT Comp Time WOP Without Pay | | | |
| I certify t | hat all informa | ntion is correct as | s indicated: | | | | | | | |
| Employee's Signature: | | | | | Date: | | | | | |
| Superviso | or's Signature: | | | | Date: | | | | _ | |
| POS 1 - VCSBSA USE ONLY | | | | | POS 2 - VCS | POS 2 - VCSBSA USE ONLY | | | | |
| Code | Rate | Units | A | mount | Code | Rate | Units | A | mount | |
| REG | | | | | REG | | | | | |
| OTS | | | | | OTS | | | | | |
| OT1 | | | | | OT1 | | | | | |
| WOP | | | | | WOP | | | | | |
| | Ī | 1 | | | | | 1 | | | |

Total Pay: