KEDC Hourly Employee Certification of Time

Each Hourly Employee shall complete and submit this form to their immediate supervisor for each pay period at the time designated by the Business Office.

EMPLOYEE NAME:_____

PAY PERIOD BEGINNING:_____**PAY PERIOD ENDING:**_____

PROJECT/ JOB	DATE MM/DD	TIME IN	LUNCH OUT	LUNCH IN	TIME OUT	ACTUAL HOURS WORKED[1] Regular	Overtime[2]	TOTAL HOURS	LEAVE TYPE/ AMOUNT USED[3]
PROJECT/ JOB	**DATE MM/DD**	**TIME IN**	**LUNCH OUT**	**LUNCH IN**	**TIME OUT**	**ACTUAL HOURS WORKED[1] Regular**	**Overtime[2]**	**TOTAL HOURS**	**LEAVE TYPE/ AMOUNT USED[3]**
PROJECT/ JOB	**DATE MM/DD**	**TIME IN**	**LUNCH OUT**	**LUNCH IN**	**TIME OUT**	**ACTUAL HOURS WORKED[1] Regular**	**Overtime[2]**	**TOTAL HOURS**	**LEAVE TYPE/ AMOUNT USED[3]**
TOTAL HOURS FOR PAY PERIOD									

[1]**Supervisor will direct employee how to calculate in terms of breaks, lunch period, etc.**
[2]**Overtime shall be authorized in accordance with KEDC Board Policy 03.121.**

[3]LEAVE KEY	
A=annual	**N=non-contract**
H=holiday	**S=sick**
P=personal	**J=jury duty**
E=emergency	

I hereby certify that this time sheet is a correct statement of actual hours worked during this pay period.

Employee signature:_____

Supervisor signature:_____

Division Head signature:_____