

CITY OF TALLAHASSEE
PAY / TIME SHEET

UNIT / EMPL NO (Number)	EMPLOYEE NAME Name Dustin Daniels	POSITION NO.	OT CLASS	PERIOD ENDING 01/30/15					
DEPARTMENT Office of the Mayor		DIVISION			UNIT				
	PAY CODE	1/24/2015 SAT	1/25/2015 SUN	1/26/2015 MON	1/27/2015 TUE	1/28/2015 WED	1/29/2015 THU	1/30/2015 FRI	TOTAL
REGULAR HRS				8.00	8.00	8.00	8.00		32.00
HOLIDAY x 1.0									0.00
Pre Approved PERSONAL	PAPER								0.00
OT x 1.5	OT								0.00
OT x 1.0	ST								0.00
ON CALL	ONC								0.00
CALL BACK	CB								0.00
HOLIDAY x 1.5	HOL								0.00
COMP EARNED	COMPE								0.00
COMP TAKEN	COMPT								0.00
PERSONAL	PER							8.00	8.00
SICK	SICK								0.00
CATASTROPHIC	CAT								0.00
MILITARY	MILIT								0.00
ADMINISTRATIVE	ADMIN								0.00
Leave without Pay	LWOP								0.00
Other									0.00
TOTAL		0.00	0.00	8.00	8.00	8.00	8.00	8.00	40.00

EMPLOYEE'S SIGNATURE



SUPERVISOR'S SIGNATURE

