



FOOD SERVICE TIME REPORT

FOR TEMPORARY PROMOTIONS

Employee ID # _____
Required on all timesheets (found on Check/Direct Deposit Advice)

Pay Period Ending _____
(MM/DD/YY)

1936 Carlotta Dr., Wing B
 Concord, CA 94519
 (925) 682-8000, ext. 4201

Name _____
(Last) (First) (Middle Initial) Job Title _____
(PLEASE PRINT ALL INFORMATION)

PLEASE SUBMIT TO THE FOOD SERVICE OFFICE BY THE END OF PAY PERIOD.

DATE	TOTAL HOURS	SITE	TEMP PROMOTION POSITION	SUBSTITUTED FOR/REASON/OPEN
21	:			
22	:			
23	:			
24	:			
25	:			
26	:			
27	:			
28	:			
29	:			
30	:			
31	:			
1	:			
2	:			
3	:			
4	:			
5	:			
6	:			
7	:			
8	:			
9	:			
10	:			
11	:			
12	:			
13	:			
14	:			
15	:			
16	:			
17	:			
18	:			
19	:			
20	:			

HOURS WORKED : _____

THIS TIME REPORT MUST BE IN FOOD SERVICE OFFICE BY THE 21ST OF THE MONTH TO BE PAID.

EMPLOYEE'S SIGNATURE _____	DATE _____
APPROVED BY MANAGER _____	DATE _____
APPROVED BY SUPERVISOR _____	DATE _____

Hours	Hour Code	Rate of Pay	Expense Code
			Upgrade 13.5310.0000.3700.61100.000. _____.009.2260
			Upgrade 13.5310.0000.3700.61100.000. _____.009.2260
			Upgrade 13.5310.0000.3700.61100.000. _____.009.2260
			Upgrade 13.5310.0000.3700.61100.000. _____.009.2260
			OT Upgrade 13.5310.0000.3700.61100.000. _____.009.2260