FOOD SERVICE TIME REPORT

FOR TEMPORARY PROMOTIONS

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

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

Pay Period Ending _____ (MM/DD/YY)

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 13.5310.0000.3700.61100.000.509.009.2260
			OT Upgrade 13.5310.0000.3700.61100.000. 509.009.2210