

**UCLA DEPARTMENT OF PHYSICS and ASTRONOMY  
Biweekly Time Sheet**

NAME \_\_\_\_\_ PAY PERIOD \_\_\_\_\_  
(Last Name, First Name)

PAY TITLE \_\_\_\_\_ EMPLOYEE ID# \_\_\_\_\_

**hours not submitted by the due date will be processed with the next biweekly payroll**

ACCOUNT/FUND INFORMATION		DAY	DATE	A	B	C	HOL	VAC	SL	OTHER
A  B  C  <u>VACATION</u> PREV. BAL. _____ TAKEN _____ EARNED* _____ CURRENT BAL. _____  <u>SICK LEAVE</u> PREV. BAL. _____ TAKEN _____ EARNED* _____ CURRENT BAL. _____  <u>COMP TIME</u> PREV. BAL. _____ TAKEN _____ CTA@1.0 _____ @1.5 _____ CURRENT BAL. _____  *Hours earned this month may not be taken until next month.	SUN									
	MON									
	TUE									
	WED									
	THU									
	FRI									
	SAT									
	SUN									
	MON									
	TUE									
	WED									
	THU									
	FRI									
	SAT									
SUB TOT										
TOTAL NUMBER OF HOURS FOR PAY PERIOD										
CODE FOR "OTHER" CTA=Comp Time Earned/CTO=Comp Time Taken JD=Jury Duty/BD=Blood Donation										

I certify the hours reported above are correct:

\_\_\_\_\_  
Employee Signature Date

\_\_\_\_\_  
Supervisor Approval Date

rg\_\_\_\_  
js\_\_\_\_