William & Mary Human Resources & Payroll **Manual Timesheet Form**

Type of Employee:

Exempt

Pay Period Reporting for:

Month	Pay Period	Year
1	25-09	

Name:

Banner ID:

Position #

Department:

Banner Orgn:

Phone Number

Dates-> Earned or Used:	25	26	27	28	29	30	31	1	2	3	4	5	6	7	8	9
Holiday Pay																
On Call Pay																
Additional Hours Worked(Pay)																
Additional Hours Worked(Leave Earned)																
Annual Leave Taken																
Compensatory Leave Taken																
Community Service Leave Taken																
Overtime Leave Taken																
Recognition Leave Taken																
Sick Leave Taken																
VSDP Family Personal Leave Taken																
Administrative Leave Taken																
Militay Leave Taken																
Leave W/O Pay Manual																
Workers Comp Leave Taken																
Total Hours	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

☐ Original Time sheet never submitted because

☐ Correction to original submission (copy attached)

☐ Other Reason:

I hereby certify that this report correctly reflects all time worked by me for the pay period indicated.

Signature: **Approved By:** **Date:**