Audubon Area Community Services, Inc.

PROGRAM: _____ **EMPLOYEE#:** _____

STAFF MEMBER: _____

EXEMPT STAFF TIME & ATTENDANCE REPORT

PAY PERIOD: July 4, 2009 (DATE) through July 17, 2009 (DATE)

COUNTY: Daviess

Each employee is responsible for accounting for his/her actual number of hours worked each day. Exempt staff shall report leave only in full-day increments. A leave slip must be attached for the leave time used. Time and Attendance Reports are to be received in the Payroll Department within five calendar days following the close of the pay period. All time is to be reported in no less than 1/4 hours fractions.

MONTH / DATE	DAY	TIME		HOURS WORKED								EXPLANATION	APPROVED LEAVE						FOR FUTURE USE						
		IN	OUT	TOT	REG	01							TOT	Vac.	Med.	Other	Hol.	W/O Pay							
July 4	Sa																								
July 5	Su																								
July 6	Mo					0.00																			
July 7	Tu					0.00																			
July 8	We					0.00																			
July 9	Th					0.00																			
July 10	Fr					0.00																			
				0.00	**0.00**	**0.00**							0.00	0.00	0.00	0.00	0.00	0.00							
July 11	Sa																								
July 12	Su																								
July 13	Mo					0.00																			
July 14	Tu					0.00																			
July 15	We					0.00																			
July 16	Th					0.00																			
July 17	Fr					0.00																			
WEEK TOTAL				**0.00**	**0.00**	0.00							0.00	0.00	0.00	0.00	0.00	0.00							
TOTALS				**0.00**	**0.00**	**0.00**							0.00	0.00	0.00	0.00	0.00	0.00							

I certify the above Time and Attendance Report to be true and correct.

Employee Signature

Reviewed and Approved:

Ronald Logsdon