

CHICO AREA RECREATION & PARK DISTRICT

Bi-Weekly Time Card for the Month of

Employee # Employee Name:

Supervisor:

Department: Admin Rec Park Officials

Week # 1	Date	Time In	Time Out	Time In	Time Out	Time In	Time Out	Daily Hours
Saturday	5-Nov							-
Sunday	6-Nov							-
Monday	7-Nov							-
Tuesday	8-Nov							-
Wednesday	9-Nov							-
Thursday	10-Nov							-
Friday	11-Nov							-
Week # 1 Hours								-

Week # 2	Date	Time In	Time Out	Time In	Time Out	Time In	Time Out	Daily Hours
Saturday	12-Nov							-
Sunday	13-Nov							-
Monday	14-Nov							-
Tuesday	15-Nov							-
Wednesday	16-Nov							-
Thursday	17-Nov							-
Friday	18-Nov							-
Week # 2 Hours								-

Total Hours Worked _____

Total by Program Code	Program Code #	Program Code #	Program Code #	Program Code #	Program Code #	Program Code #	Program Code #
-							
-							
-							
-							
-							
-							
-							
-							
-							

-							
-							
-							
-							
-							
-							
-							
-							
-							
-							

Pay Rate >	000000	000000	000000	000000	000000	000000	000000
------------	--------	--------	--------	--------	--------	--------	--------

The above time reporting is correct and by signing below I attest to the accuracy of this reporting.
I also acknowledge that I have taken all rest periods as scheduled.

Employee Signature: _____

Reviewed by: _____

Approved by: _____

FULL-TIME SPECIAL CODES:			
SICK LEAVE	03	BREAVEMENT	07
VACATION	04	ADMIN LEAVE	09
HOLIDAY	05	COMP TIME	15