UNIVERSITY OF NEVADA, LAS VEGAS
TIME SHEET

ACCOUNT NUMBER:
ACCOUNT DESCRIPTION:

SSN# EMPLOYEE NAME TOTAL HOURS
_____

Pay Period: ***From:____/25/2005*** ***To: ____/9/2005***

Day From To Total

*25*_____

*26*_____

*27*_____

*28*_____

*29*_____

*30*_____

*31*_____

*1*_____

*2*_____

*3*_____

*4*_____

*5*_____

*6*_____

*7*_____

*8*_____

*9*_____

Total Hours this Period: _____

Employee Signature *Date*

Supervisor Signature *Date* *Authorizing Signature* *Date*