

PAY PERIOD 23 2019

Adding Quality to Life

Last Name			First Name				M.I.							Employee #		Period Ends 11/01/19	
Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thur	Fri	Total			
10/19	10/20	10/21	10/22	10/23	10/24	10/25	10/26	10/27	10/28	10/29	10/30	10/31	11/1				Hourly Rate
														-	Regular Hours	102	
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														-	G/L#		
														_	G/L#		
														_	G/L#		
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															G/L#		
															J. Lii	l	
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	TOTALS		

Notes:		Hours Worked	
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	I declare under the applicable penalties of law that to the best of my knowledge this information is correct		
	Employee Signature	Auth	norized Signature