

1 8 6 4

Timesheet Org: _____	Payroll Number: _____	Pay Period: _____ to _____
Banner ID: _____	Last Name: _____	First Name: _____

Position: _____	Suffix: _____
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Description	Earn Code	Fund	Org	Account	Program	Costshare Actv Code	PERCENT	OR	HOURS	OR	AMOUNT
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
21											
22											
23											
24											
25											
TOTAL PER MONTH							0.00%		-		\$ -

<p style="text-align: center;"><i>I certify that the above is an accurate account of the hours worked and leave taken.</i></p> <p>Employee: _____ Date: _____</p>	<p style="text-align: center;"><i>I certify that I have a suitable means to verify time worked and leave taken, and I approve of time submitted.</i></p> <p>Supervisor #1: _____ Date: _____</p> <p>Supervisor #2: _____ Date: _____</p>												
<p>Instructions <i>Questions? Call ORSP 303-871-4054.</i></p> <p>Employee: Complete one form per timesheet org and sign. Obtain signature(s) of supervisor(s). Submit completed, signed timesheet to your Department Timekeeper.</p> <p>Department Timekeeper: Forward completed, signed, original timesheet to ORSP by payroll due date.</p> <p>ORSP: Pay distribution will be entered into Banner PHAREDS upon receipt of completed, signed, original timesheet. If completed, signed timesheet is not received in ORSP by due date, pay distribution will be charged against employee's department FOAP.</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="background-color: #00FFFF;">Dept Use Only:</td> <td style="width:50%;"></td> <td style="background-color: #00FFFF;">ORSP Use Only</td> </tr> <tr> <td>Date Entered: _____</td> <td></td> <td>Date Received: _____</td> </tr> <tr> <td>Timekeeper / Print Name: _____</td> <td></td> <td>Date Dis/Approved: _____</td> </tr> <tr> <td>Phone ext.: _____</td> <td></td> <td></td> </tr> </table>	Dept Use Only:		ORSP Use Only	Date Entered: _____		Date Received: _____	Timekeeper / Print Name: _____		Date Dis/Approved: _____	Phone ext.: _____		
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Phone ext.: _____													