2012 INCLUSION TIMESHEET

ALL TIMESHEETS ARE DUE TO SEASPAR BY MIDNIGHT SATURDAY. INDICATE CURRENT PAY PERIOD BELOW.

☐#2–1/7	☐#4–1/21	☐#6–2/4	☐#8–2/18	☐#10–3/3	☐#12–3/17	☐#14–3/31	☐#16–4/14	☐#18–4/28
☐#20–5/12	☐#22–5/24*	☐#24–6/9	☐#26–6/23	☐#28–7/7	☐#30–7/21	☐#32–8/4	☐#34–8/18	☐#36–8/30*
☐#38–9/15	☐#40–9/29	☐#42–10/13	☐#44–10/27	☐#46–11/10	☐#48–11/24	☐#50–12/8	☐#52–12/20*	

*** Change in due date because of upcoming Holiday.**

Partial hours are totaled as follows: ¼ hour = .25 ½ hour = .50 ¾ hour = .75

PROGRAM NAME	TOWN	PARTICIPANT NAME	Day	Date	Time Worked	Total Hours	Supervisor Approval	Office Use Only: Travel Time (BH)	Office Use Only: Brian Approval	Office Use Only: Payroll Dept.

Total Hours _____

STAFF NAME _____ **DATE** _____

(Please Print)

Timesheet may be faxed to SEASPAR at 630/960-7601. **1/3/2012**