Attendance Report

Name: Name

Pay Period: Pay Period -

Department No. Department No.

Employee No. Employee No.

Payroll No. Payroll No.

Date	In	Out	Total	Explanation

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

This is to certify that the above report is a true statement of attendance.

_____

Signature of Employee

This is to certify that I have reviewed the above report and find it to be in order.

_____

Signature of Supervisor

This is to certify that I have reviewed the above report and find it to be in order.

_____

Signature of Dept Head

Attendance Report

Name: Name

Pay Period: Pay Period -

Department No. Department No.

Employee No. Employee No.

Payroll No. Payroll No.

Date	In	Out	Total	Explanation

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Supervisor

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Signature of Dept Head

Attendance Report

Name: Name

Pay Period: Pay Period -

Department No. Department No.

Employee No. Employee No.

Payroll No. Payroll No.

Date	In	Out	Total	Explanation

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Supervisor

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Signature of Dept Head

Attendance Report

Name: Name

Pay Period: Pay Period -

Department No. Department No.

Employee No. Employee No.

Payroll No. Payroll No.

Date	In	Out	Total	Explanation

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Supervisor

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_____

Signature of Dept Head

Attendance Report

Name: Name

Pay Period: Pay Period -

Department No. Department No.

Employee No. Employee No.

Payroll No. Payroll No.

Date	In	Out	Total	Explanation

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

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_____

Signature of Supervisor

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_____

Signature of Dept Head

Attendance Report

Name: SGT Eric Bakay

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 529

Payroll No. 0000001691

Date	In	Out	Total	Explanation
09/26/2021	18:00	06:00	12.00	
09/27/2021		Off	0.00	Reg Day Off
09/28/2021		Off	0.00	Reg Day Off
09/29/2021	18:00	06:00	12.00	
09/30/2021	18:00	06:00	12.00	
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	18:00	06:00	12.00	
10/05/2021	18:00	06:00	12.00	
10/06/2021		Off	0.00	Reg Day Off
10/07/2021		Off	0.00	Reg Day Off
10/08/2021	18:00	06:00	12.00	
10/09/2021	18:00	06:00	12.00	

Details				
Date	**Start**	**End**	**Total**	**Explanation**
10/07/2021	18:00	06:00	12.00	Manpower Shortage @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		84.00	84.00	12.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

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Signature of Supervisor

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Signature of Dept Head

Attendance Report

Name: PTL Shawn Bruton

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 415

Payroll No. 0000009050

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	08:30	16:30	8.00	
09/28/2021	08:30	16:30	8.00	
09/29/2021	08:30	16:30	8.00	
09/30/2021	08:30	16:30	8.00	
10/01/2021	08:30	16:30	8.00	
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	08:30	16:30	8.00	
10/05/2021	08:30	16:30	8.00	
10/06/2021	08:30	16:30	8.00	
10/07/2021	08:30	16:30	8.00	
10/08/2021	08:30	16:30	8.00	
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/26/2021	10:00	22:30	12.50	Investigation @1.5Cash
09/27/2021	16:30	22:00	5.50	Investigation @1.5Cash
09/28/2021	16:30	21:30	5.00	Investigation @1.5Cash
09/30/2021	16:30	20:00	3.50	Investigation @1.5Cash
10/03/2021	11:00	22:00	11.00	Investigation @1.5Cash
10/04/2021	16:30	21:00	4.50	Investigation @1.5Cash
10/06/2021	03:30	08:30	5.00	Investigation @1.5Cash
10/07/2021	06:00	08:30	2.50	Investigation @1.5Cash
10/07/2021	16:30	19:30	3.00	Investigation @1.5Cash
10/08/2021	16:30	20:00	3.50	Investigation @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		80.00	80.00	56.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____	_____	_____
Signature of Employee	*Signature of Supervisor*	*Signature of Dept Head*

Attendance Report

Name: PTL John Cain

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 552

Payroll No.

Date	In	Out	Total	Explanation
09/26/2021	06:00	18:00	12.00	
09/27/2021		Off	0.00	Reg Day Off
09/28/2021		Off	0.00	Reg Day Off
09/29/2021	06:00	18:00	12.00	
09/30/2021	06:00	18:00	12.00	
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	06:00	18:00	12.00	
10/05/2021	06:00	18:00	12.00	
10/06/2021		Off	0.00	Reg Day Off
10/07/2021		Off	0.00	Reg Day Off
10/08/2021	06:00	18:00	12.00	
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
10/06/2021	08:00	19:00	11.00	QUASI - REGULAR @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		72.00	72.00	11.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

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Signature of Supervisor

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Signature of Dept Head

Attendance Report

Name: LT Christopher Clifton
Pay Period: 09/26/2021 - 10/09/2021

Department No.
Employee No. 533
Payroll No. 0000001431

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021		Off	0.00	8 Funeral Leave
09/28/2021		Off	0.00	8 Funeral Leave
09/29/2021		Off	0.00	8 Funeral Leave
09/30/2021		Off	0.00	8 Funeral Leave
10/01/2021		Off	0.00	8 Funeral Leave
10/02/2021	17:00	19:00	2.00	
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	07:00	15:00	8.00	
10/05/2021	07:00	15:00	8.00	
10/06/2021	06:00	14:00	8.00	
10/07/2021	07:00	08:00	1.00	5 Vacation Day
10/08/2021	07:00	13:30	6.50	
10/09/2021	06:00	12:00	6.00	

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/27/2021	07:00	15:00	8.00	Funeral Leave
09/28/2021	07:00	15:00	8.00	Funeral Leave
09/29/2021	07:00	15:00	8.00	Funeral Leave
09/30/2021	07:00	15:00	8.00	Funeral Leave
10/01/2021	07:00	15:00	8.00	Funeral Leave
10/02/2021	19:00	23:00	4.00	QUASI - REGULAR @1.5Cash
10/07/2021	08:00	15:00	7.00	QUASI - REGULAR @1.5Cash
10/07/2021	08:00	13:00	5.00	Vacation Day

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		39.50	84.50	11.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____
Signature of Employee

_____
Signature of Supervisor

_____
Signature of Dept Head

Attendance Report

Name: LT Thomas Egan

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 538

Payroll No. 0000000019

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	09:00	19:00	10.00	
09/28/2021	09:00	13:00	4.00	6 Comp Time
09/29/2021		Off	0.00	Reg Day Off
09/30/2021		Off	0.00	10 Sick Day
10/01/2021	09:00	19:00	10.00	
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	06:00	18:00	12.00	
10/05/2021	06:00	18:00	12.00	
10/06/2021		Off	0.00	Reg Day Off
10/07/2021		Off	0.00	Reg Day Off
10/08/2021	06:00	18:00	12.00	
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/28/2021	13:00	19:00	6.00	Comp Time
09/30/2021	09:00	19:00	10.00	Sick Day
10/06/2021	08:00	16:00	8.00	QUASI - REGULAR @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		60.00	76.00	8.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____

Signature of Employee

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Signature of Supervisor

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_____

Signature of Dept Head

Attendance Report

Name: SGT Michael Farrell

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 534

Payroll No. 0000004051

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	18:00	06:00	12.00	
09/28/2021	18:00	06:00	12.00	
09/29/2021		Off	0.00	Reg Day Off
09/30/2021		Off	0.00	Reg Day Off
10/01/2021		Off	0.00	12 Vacation Day
10/02/2021	18:00	06:00	12.00	
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	06:00	18:00	12.00	
10/05/2021		Off	0.00	Reg Day Off
10/06/2021	06:00	18:00	12.00	
10/07/2021	06:00	18:00	12.00	
10/08/2021		Off	0.00	Reg Day Off
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
10/01/2021	18:00	06:00	12.00	Vacation Day

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		72.00	84.00	0.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

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Signature of Supervisor

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_____

Signature of Dept Head

Attendance Report

Name: SGT Peter Galazka

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 531

Payroll No. 0000001731

Date	In	Out	Total	Explanation
09/26/2021	06:00	18:00	12.00	
09/27/2021		Off	0.00	Reg Day Off
09/28/2021		Off	0.00	Reg Day Off
09/29/2021	06:00	18:00	12.00	
09/30/2021	06:00	15:00	9.00	3 Vacation Day
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021	18:00	06:00	12.00	
10/04/2021		Off	0.00	Reg Day Off
10/05/2021	06:00	18:00	12.00	
10/06/2021		Off	0.00	Reg Day Off
10/07/2021		Off	0.00	Reg Day Off
10/08/2021	06:00	18:00	12.00	
10/09/2021	06:00	18:00	12.00	

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/27/2021	08:00	14:00	6.00	QUASI - TOWNSHIP @1.5Cash
09/28/2021	08:00	14:00	6.00	QUASI - TOWNSHIP @1.5Cash
09/29/2021	03:00	06:00	3.00	Manpower Shortage @1.5Cash
09/30/2021	15:00	18:00	3.00	Vacation Day
10/01/2021	19:00	23:00	4.00	QUASI - REGULAR @1.5Cash
10/01/2021	09:00	13:00	4.00	QUASI - TOWNSHIP @1.5Cash
10/05/2021	10:30	14:30	4.00	QUASI - REGULAR @0.0Cash
10/07/2021	08:00	15:00	7.00	QUASI - REGULAR @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		81.00	84.00	34.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____ *Signature of Employee*

_____ *Signature of Supervisor*

_____ *Signature of Dept Head*

Attendance Report

Name: COM Dora Haines

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 430

Payroll No.

Date	In	Out	Total	Explanation
09/26/2021	18:00	06:00	12.00	
09/27/2021	18:00	22:00	4.00	
09/28/2021		Off	0.00	Reg Day Off
09/29/2021	18:00	06:00	12.00	
09/30/2021	18:00	06:00	12.00	
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	22:00	06:00	8.00	
10/05/2021	18:00	06:00	12.00	
10/06/2021		Off	0.00	Reg Day Off
10/07/2021		Off	0.00	Reg Day Off
10/08/2021	22:00	06:00	8.00	
10/09/2021	18:00	06:00	12.00	

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		80.00	80.00	0.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____

Signature of Employee

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_____

Signature of Supervisor

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_____

Signature of Dept Head

Attendance Report

Name: SGT Wayne Haugh

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 537

Payroll No. 0000000012

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	08:00	16:00	8.00	
09/28/2021	08:00	16:00	8.00	
09/29/2021	08:00	16:00	8.00	
09/30/2021	08:00	16:00	8.00	
10/01/2021	08:00	16:00	8.00	
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021		Off	0.00	Reg Day Off
10/05/2021		Off	0.00	3 Vacation Day/5 Comp Time
10/06/2021	12:00	20:00	8.00	
10/07/2021		Off	0.00	8 Comp Time
10/08/2021		Off	0.00	8 Comp Time
10/09/2021		Off	0.00	8 Vacation Day

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/28/2021	16:00	18:30	2.50	Investigation @1.5Time
09/28/2021	18:30	23:00	4.50	QUASI - SCHOOL @1.5Cash
10/02/2021	18:30	22:30	4.00	QUASI - SCHOOL @1.5Cash
10/03/2021	18:00	06:00	12.00	Manpower Shortage @1.5Cash
10/05/2021	17:00	20:00	3.00	Vacation Day
10/05/2021	12:00	17:00	5.00	Comp Time
10/05/2021	07:00	17:00	10.00	QUASI - REGULAR @1.5Cash
10/07/2021	12:00	20:00	8.00	Comp Time
10/08/2021	12:00	20:00	8.00	Comp Time
10/09/2021	08:00	16:00	8.00	Vacation Day

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		48.00	80.00	33.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____ _____ _____

Signature of Employee *Signature of Supervisor* *Signature of Dept Head*

Attendance Report

Name: PTL Shane Heisler
Pay Period: 09/26/2021 - 10/09/2021

Department No.
Employee No. 559
Payroll No.

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	08:30	16:30	8.00	
09/28/2021	08:30	16:30	8.00	
09/29/2021	08:30	16:30	8.00	
09/30/2021	08:30	16:30	8.00	
10/01/2021	08:30	16:30	8.00	
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	08:30	16:30	8.00	
10/05/2021	08:30	16:30	8.00	
10/06/2021	08:30	16:30	8.00	
10/07/2021	08:30	16:30	8.00	
10/08/2021	08:30	16:30	8.00	
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
10/01/2021	18:30	22:30	4.00	QUASI - SCHOOL @1.5Cash
10/02/2021	18:30	22:30	4.00	QUASI - SCHOOL @1.5Cash
10/08/2021	16:30	20:00	3.50	Manpower Shortage @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		80.00	80.00	11.50	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

This is to certify that the above report is a true statement of attendance.

_____
Signature of Employee

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_____
Signature of Supervisor

This is to certify that I have reviewed the above report and find it to be in order.

_____
Signature of Dept Head

Attendance Report

Name: PTL Matthew Hill

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 546

Payroll No.

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	18:00	06:00	12.00	
09/28/2021		Off	0.00	12 Schedule Comp Time
09/29/2021		Off	0.00	Reg Day Off
09/30/2021		Off	0.00	Reg Day Off
10/01/2021	18:00	06:00	12.00	
10/02/2021	18:00	06:00	12.00	
10/03/2021		Off	0.00	12 Vacation Day
10/04/2021		Off	0.00	Reg Day Off
10/05/2021		Off	0.00	Reg Day Off
10/06/2021	18:00	06:00	12.00	
10/07/2021	18:00	06:00	12.00	
10/08/2021		Off	0.00	Reg Day Off
10/09/2021	06:00	18:00	12.00	

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/28/2021	18:00	06:00	12.00	Schedule Comp Time
10/01/2021	19:00	06:00	11.00	Officer In Charge @0.0Cash
10/03/2021	18:00	06:00	12.00	Vacation Day
10/05/2021	18:00	06:00	12.00	Manpower Shortage @1.5Cash
10/09/2021	18:00	19:00	1.00	Case Involvement @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		72.00	96.00	24.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

Signature of Supervisor

Signature of Dept Head

Attendance Report

Name: SGT Scott Kivet

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 535

Payroll No. 0000005071

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	12 HOLIDAY (ADMINISTRATION)
09/27/2021		Off	0.00	Reg Day Off
09/28/2021		Off	0.00	Reg Day Off
09/29/2021	09:00	19:00	10.00	
09/30/2021	09:00	19:00	10.00	
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021		Off	0.00	Reg Day Off
10/05/2021		Off	0.00	10 Vacation Day
10/06/2021		Off	0.00	10 Vacation Day
10/07/2021		Off	0.00	10 Vacation Day
10/08/2021		Off	0.00	10 Vacation Day
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/26/2021	06:00	18:00	12.00	HOLIDAY (ADMINISTRATION)
10/02/2021	11:00	13:00	2.00	Investigation @1.5Time
10/05/2021	09:00	19:00	10.00	Vacation Day
10/06/2021	09:00	19:00	10.00	Vacation Day
10/07/2021	09:00	19:00	10.00	Vacation Day
10/08/2021	09:00	19:00	10.00	Vacation Day
10/09/2021	10:00	12:00	2.00	K-9 REQUEST @1.5Time

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		20.00	72.00	4.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

Signature of Supervisor

Signature of Dept Head

Attendance Report

Name: PTL Colin Lockwood

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 545

Payroll No.

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	12 Vacation Day
09/27/2021		Off	0.00	Reg Day Off
09/28/2021		Off	0.00	Reg Day Off
09/29/2021		Off	0.00	12 Sick Day
09/30/2021	18:00	06:00	12.00	
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	18:00	06:00	12.00	
10/05/2021	18:00	06:00	12.00	
10/06/2021		Off	0.00	Reg Day Off
10/07/2021		Off	0.00	Reg Day Off
10/08/2021	18:00	06:00	12.00	
10/09/2021	18:00	06:00	12.00	

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/26/2021	18:00	06:00	12.00	Vacation Day
09/29/2021	18:00	06:00	12.00	Sick Day
10/09/2021	16:00	18:00	2.00	Manpower Shortage @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		60.00	84.00	2.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____

Signature of Employee

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_____

Signature of Supervisor

This is to certify that I have reviewed the above report and find it to be in order.

_____

Signature of Dept Head

Attendance Report

Name: LT Adrian Markowski
Pay Period: 09/26/2021 - 10/09/2021

Department No.
Employee No. 540
Payroll No.

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	08:00	16:00	3.00	5 Comp Time
09/28/2021	08:00	16:00	8.00	
09/29/2021	08:00	16:00	8.00	
09/30/2021	14:00	16:00	2.00	6 Comp Time
10/01/2021	08:00	16:00	8.00	
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	15:30	16:00	0.50	7.5 Comp Time
10/05/2021	08:00	16:00	8.00	
10/06/2021	15:30	16:00	0.50	7.5 Comp Time
10/07/2021	08:00	08:30	0.50	7.5 Comp Time
10/08/2021	08:00	16:00	8.00	
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/27/2021	09:00	14:00	5.00	Comp Time
09/27/2021	09:00	14:00	5.00	QUASI - REGULAR @1.5Cash
09/27/2021	16:00	19:30	3.50	Investigation @1.0Time
09/28/2021	16:00	18:00	2.00	Investigation @1.5Cash
09/30/2021	08:00	14:00	6.00	QUASI - REGULAR @1.5Cash
09/30/2021	08:00	14:00	6.00	Comp Time
10/04/2021	08:00	15:30	7.50	Comp Time
10/04/2021	07:00	15:30	8.50	QUASI - REGULAR @1.5Cash
10/06/2021	07:30	15:30	8.00	QUASI - REGULAR @1.5Cash
10/06/2021	08:00	15:30	7.50	Comp Time
10/07/2021	08:30	16:00	7.50	Comp Time
10/07/2021	08:30	14:30	6.00	QUASI - REGULAR @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		46.50	80.00	39.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____	_____	_____
Signature of Employee	*Signature of Supervisor*	*Signature of Dept Head*

Attendance Report

Name: PTL Ryan Meehan

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 560

Payroll No.

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021		Off	0.00	Reg Day Off
09/28/2021		Off	0.00	Reg Day Off
09/29/2021	18:00	06:00	12.00	
09/30/2021	18:00	06:00	12.00	
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	08:00	16:00	8.00	
10/05/2021	08:00	16:00	8.00	
10/06/2021	08:00	16:00	8.00	
10/07/2021	08:00	16:00	8.00	
10/08/2021	08:00	16:00	8.00	
10/09/2021	22:00	06:00	8.00	

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		72.00	72.00	0.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____

Signature of Employee

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_____

Signature of Supervisor

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_____

Signature of Dept Head

Attendance Report

Name: SGT James Moore

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 522

Payroll No. 0000001281

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	06:00	18:00	12.00	
09/28/2021	06:00	18:00	12.00	
09/29/2021		Off	0.00	Reg Day Off
09/30/2021		Off	0.00	Reg Day Off
10/01/2021		Off	0.00	12 Vacation Day
10/02/2021	12:00	18:00	6.00	6 Vacation Day
10/03/2021	06:00	18:00	12.00	
10/04/2021		Off	0.00	Reg Day Off
10/05/2021		Off	0.00	Reg Day Off
10/06/2021	18:00	06:00	12.00	
10/07/2021		Off	0.00	12 Sick Day
10/08/2021		Off	0.00	Reg Day Off
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/29/2021	08:00	14:00	6.00	QUASI - TOWNSHIP @1.5Cash
10/01/2021	18:30	22:30	4.00	QUASI - SCHOOL @1.5Cash
10/01/2021	06:00	18:00	12.00	Vacation Day
10/02/2021	06:00	12:00	6.00	Vacation Day
10/02/2021	18:30	22:30	4.00	QUASI - SCHOOL @1.5Cash
10/07/2021	18:00	06:00	12.00	Sick Day

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		54.00	84.00	14.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

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Signature of Supervisor

This is to certify that I have reviewed the above report and find it to be in order.

Signature of Dept Head

Attendance Report

Name: PTL Robert Morgano

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 544

Payroll No.

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	06:00	18:00	12.00	
09/28/2021	06:00	18:00	12.00	
09/29/2021		Off	0.00	Reg Day Off
09/30/2021		Off	0.00	Reg Day Off
10/01/2021	06:00	18:00	12.00	
10/02/2021	06:00	18:00	12.00	
10/03/2021	06:00	18:00	12.00	
10/04/2021		Off	0.00	Reg Day Off
10/05/2021		Off	0.00	Reg Day Off
10/06/2021	06:00	18:00	12.00	
10/07/2021	06:00	18:00	12.00	
10/08/2021		Off	0.00	Reg Day Off
10/09/2021		Off	0.00	Reg Day Off

Details

Date	Start	End	Total	Explanation
09/30/2021	06:00	18:00	12.00	Manpower Shortage @1.5Cash
10/01/2021	06:00	09:00	3.00	Officer In Charge @0.0Cash
10/02/2021	06:00	12:00	6.00	Officer In Charge @0.0Cash
10/04/2021	18:00	06:00	12.00	Manpower Shortage @1.5Cash
10/09/2021	12:00	18:00	6.00	Manpower Shortage @1.5Cash
10/09/2021	18:00	19:00	1.00	Work Load @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		84.00	84.00	40.00	0.00

Prior Period

Date	Start	End	Total	Explanation

Closed Period Adjustments

Date	Start	End	Total	Explanation

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Signature of Employee

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Signature of Supervisor

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Signature of Dept Head

Attendance Report

Name: COM Kathy Murr

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 404

Payroll No. 0000001041

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	10:00	18:00	8.00	
09/28/2021	06:00	18:00	12.00	
09/29/2021		Off	0.00	Reg Day Off
09/30/2021		Off	0.00	Reg Day Off
10/01/2021	06:00	14:00	8.00	
10/02/2021	06:00	18:00	12.00	
10/03/2021	06:00	18:00	12.00	
10/04/2021	06:00	10:00	4.00	
10/05/2021		Off	0.00	Reg Day Off
10/06/2021	06:00	18:00	12.00	
10/07/2021	06:00	18:00	12.00	
10/08/2021		Off	0.00	Reg Day Off
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		80.00	80.00	0.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

Signature of Supervisor

Signature of Dept Head

Attendance Report

Name: COM Kathleen OConnor
Pay Period: 09/26/2021 - 10/09/2021

Department No.
Employee No. 401
Payroll No. 0000000451

Date	In	Out	Total	Explanation
09/26/2021	06:00	18:00	12.00	
09/27/2021	06:00	10:00	4.00	
09/28/2021		Off	0.00	Reg Day Off
09/29/2021	06:00	18:00	12.00	
09/30/2021	06:00	18:00	12.00	
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	10:00	18:00	8.00	
10/05/2021	06:00	18:00	12.00	
10/06/2021		Off	0.00	Reg Day Off
10/07/2021		Off	0.00	Reg Day Off
10/08/2021	06:00	12:00	6.00	2 Vacation Day
10/09/2021		Off	0.00	12 Vacation Day

Details				
Date	**Start**	**End**	**Total**	**Explanation**
10/08/2021	12:00	14:00	2.00	Vacation Day
10/09/2021	06:00	18:00	12.00	Vacation Day

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		66.00	80.00	0.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

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Signature of Supervisor

This is to certify that I have reviewed the above report and find it to be in order.

Signature of Dept Head

Attendance Report

Name: PTL James Pica

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 555

Payroll No.

Date	In	Out	Total	Explanation
09/26/2021	18:00	06:00	12.00	
09/27/2021	18:00	06:00	12.00	
09/28/2021	18:00	06:00	12.00	
09/29/2021		Off	0.00	Reg Day Off
09/30/2021		Off	0.00	Reg Day Off
10/01/2021	18:00	06:00	12.00	
10/02/2021	18:00	19:45	1.75	6.25 Comp Time
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	08:00	16:00	8.00	
10/05/2021	08:00	16:00	8.00	
10/06/2021	08:00	16:00	8.00	
10/07/2021	08:00	16:00	8.00	
10/08/2021	08:00	16:00	8.00	
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
10/02/2021	19:45	02:00	6.25	Comp Time

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		89.75	96.00	0.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

Signature of Supervisor

Signature of Dept Head

Attendance Report

Name: CHF Michael Polaski

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 308

Payroll No. 0000001071

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	07:00	15:00	8.00	
09/28/2021	07:30	15:30	8.00	
09/29/2021	07:30	13:00	5.50	2.5 Comp Time
09/30/2021		Off	0.00	8 Vacation Day
10/01/2021		Off	0.00	8 Vacation Day
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	07:30	15:30	8.00	
10/05/2021	07:30	15:30	8.00	
10/06/2021	07:00	08:00	1.00	7 Comp Time
10/07/2021	07:00	15:00	8.00	
10/08/2021	07:30	15:30	8.00	
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/28/2021	15:30	23:00	7.50	Township Meeting @1.5Time
09/29/2021	13:00	15:30	2.50	Comp Time
09/30/2021	07:30	15:30	8.00	Vacation Day
10/01/2021	07:30	15:30	8.00	Vacation Day
10/06/2021	08:00	15:00	7.00	Comp Time
10/06/2021	08:00	19:00	11.00	QUASI - REGULAR @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		54.50	80.00	18.50	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

Signature of Supervisor

Signature of Dept Head

Attendance Report

Name: DET Robert Quinn III
Pay Period: 09/26/2021 - 10/09/2021

Department No.
Employee No. 543
Payroll No.

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021		Off	0.00	Reg Day Off
09/28/2021	14:00	20:00	6.00	2 Comp Time
09/29/2021	14:00	20:00	6.00	2 Comp Time
09/30/2021	12:00	20:00	8.00	
10/01/2021	12:00	20:00	8.00	
10/02/2021		Off	0.00	8 Comp Time
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	08:00	09:00	1.00	7 Comp Time
10/05/2021	08:00	16:00	8.00	
10/06/2021	06:00	18:00	12.00	
10/07/2021	06:00	18:00	12.00	
10/08/2021		Off	0.00	Reg Day Off
10/09/2021		Off	0.00	Reg Day Off

Details

Date	Start	End	Total	Explanation
09/28/2021	12:00	14:00	2.00	Comp Time
09/28/2021	08:00	14:00	6.00	QUASI - TOWNSHIP @1.5Cash
09/29/2021	08:00	14:00	6.00	QUASI - TOWNSHIP @1.5Cash
09/29/2021	12:00	14:00	2.00	Comp Time
10/02/2021	08:00	16:00	8.00	Comp Time
10/03/2021	13:30	15:30	2.00	Investigation @1.5Cash
10/04/2021	09:00	16:00	7.00	QUASI - REGULAR @1.5Cash
10/04/2021	09:00	16:00	7.00	Comp Time

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		61.00	80.00	21.00	0.00

Prior Period

Date	Start	End	Total	Explanation

Closed Period Adjustments

Date	Start	End	Total	Explanation

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Signature of Employee

Signature of Supervisor

Signature of Dept Head

Attendance Report

Name: COM Victor Raczka

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 423

Payroll No.

Date	In	Out	Total	Explanation
09/26/2021	10:00	22:00	12.00	
09/27/2021	06:00	10:00	4.00	
09/28/2021		Off	0.00	Reg Day Off
09/29/2021	10:00	22:00	12.00	
09/30/2021	10:00	22:00	12.00	
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	09:00	21:00	12.00	
10/05/2021	06:00	10:00	4.00	
10/06/2021		Off	0.00	Reg Day Off
10/07/2021		Off	0.00	Reg Day Off
10/08/2021	10:00	22:00	12.00	
10/09/2021	06:00	18:00	12.00	

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		80.00	80.00	0.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

This is to certify that the above report is a true statement of attendance.

_____

Signature of Employee

This is to certify that I have reviewed the above report and find it to be in order.

_____

Signature of Supervisor

This is to certify that I have reviewed the above report and find it to be in order.

_____

Signature of Dept Head

Attendance Report

Name: COM Vivian Salguero-Cincilla
Pay Period: 09/26/2021 - 10/09/2021

Department No.
Employee No. 428
Payroll No.

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	22:00	06:00	8.00	
09/28/2021	18:00	06:00	12.00	
09/29/2021		Off	0.00	Reg Day Off
09/30/2021		Off	0.00	Reg Day Off
10/01/2021	22:00	06:00	8.00	
10/02/2021	18:00	06:00	12.00	
10/03/2021	18:00	06:00	12.00	
10/04/2021	18:00	22:00	4.00	
10/05/2021		Off	0.00	Reg Day Off
10/06/2021	18:00	06:00	12.00	
10/07/2021	18:00	06:00	12.00	
10/08/2021		Off	0.00	Reg Day Off
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		80.00	80.00	0.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____
Signature of Employee

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_____
Signature of Supervisor

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_____
Signature of Dept Head

Attendance Report

Name: DET Thomas Septak

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 550

Payroll No.

Date	In	Out	Total	Explanation
09/26/2021	06:00	18:00	12.00	
09/27/2021		Off	0.00	Reg Day Off
09/28/2021		Off	0.00	Reg Day Off
09/29/2021	06:00	15:00	9.00	3 Sick Day
09/30/2021		Off	0.00	12 Sick Day
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021		Off	0.00	12 Schedule Comp Time
10/05/2021		Off	0.00	12 Schedule Comp Time
10/06/2021		Off	0.00	Reg Day Off
10/07/2021		Off	0.00	Reg Day Off
10/08/2021		Off	0.00	12 Personal
10/09/2021		Off	0.00	12 Personal

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/28/2021	08:00	14:00	6.00	QUASI - REGULAR @0.0Cash
09/29/2021	15:00	18:00	3.00	Sick Day
09/30/2021	06:00	18:00	12.00	Sick Day
10/04/2021	06:00	18:00	12.00	Schedule Comp Time
10/05/2021	06:00	18:00	12.00	Schedule Comp Time
10/08/2021	06:00	18:00	12.00	Personal
10/09/2021	06:00	18:00	12.00	Personal

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		21.00	84.00	6.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____ *Signature of Employee*

_____ *Signature of Supervisor*

_____ *Signature of Dept Head*

Attendance Report

Name: PTL Michael Slininger

Pay Period: 09/26/2021 - 10/09/2021

Department No.

Employee No. 425

Payroll No.

Date	In	Out	Total	Explanation
09/26/2021	18:00	06:00	12.00	
09/27/2021		Off	0.00	Reg Day Off
09/28/2021		Off	0.00	Reg Day Off
09/29/2021	15:00	03:00	12.00	
09/30/2021	18:00	06:00	12.00	
10/01/2021		Off	0.00	Reg Day Off
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	08:00	16:00	8.00	
10/05/2021	08:00	16:00	8.00	
10/06/2021	08:00	16:00	8.00	
10/07/2021	08:00	16:00	8.00	
10/08/2021	08:00	16:00	8.00	
10/09/2021	18:00	02:00	8.00	

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/30/2021	15:00	18:00	3.00	Manpower Shortage @1.5Cash
10/02/2021	19:00	23:00	4.00	QUASI - REGULAR @1.5Cash
10/09/2021	16:00	18:00	2.00	Manpower Shortage @1.5Cash

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		84.00	84.00	9.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee

Signature of Supervisor

Signature of Dept Head

Attendance Report

Name: Name

Pay Period: Pay Period -

Department No. Department No.

Employee No. Employee No.

Payroll No. Payroll No.

Date	In	Out	Total	Explanation

Details				
Date	**Start**	**End**	**Total**	**Explanation**

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____

Signature of Employee

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_____

Signature of Supervisor

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_____

Signature of Dept Head

Attendance Report

Name: LT William Swanhart 3rd
Pay Period: 09/26/2021 - 10/09/2021

Department No.
Employee No. 539
Payroll No. 0000009051

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	08:00	16:00	3.00	5 Comp Time
09/28/2021	08:00	16:00	3.00	5 Comp Time
09/29/2021	08:00	16:00	8.00	
09/30/2021	14:00	16:00	2.00	6 Comp Time
10/01/2021		Off	0.00	8 Vacation Day
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021		Off	0.00	8 Vacation Day
10/05/2021	08:00	16:00	8.00	
10/06/2021		Off	0.00	8 Comp Time
10/07/2021	07:00	15:00	8.00	
10/08/2021	07:00	15:00	8.00	
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/27/2021	09:00	14:00	5.00	Comp Time
09/27/2021	09:00	14:00	5.00	QUASI - REGULAR @1.5Cash
09/28/2021	09:00	14:00	5.00	QUASI - REGULAR @1.5Cash
09/28/2021	09:00	14:00	5.00	Comp Time
09/28/2021	16:00	17:30	1.50	Case Involvement @1.5Time
09/30/2021	08:00	14:00	6.00	Comp Time
09/30/2021	08:00	14:00	6.00	QUASI - REGULAR @1.5Cash
10/01/2021	08:00	16:00	8.00	Vacation Day
10/04/2021	08:00	16:00	8.00	Vacation Day
10/06/2021	08:00	16:00	8.00	QUASI - REGULAR @1.5Cash
10/06/2021	08:00	16:00	8.00	Comp Time

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		40.00	80.00	25.50	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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Signature of Employee *Signature of Supervisor* *Signature of Dept Head*

Attendance Report

Name: PTL Edward Vincent
Pay Period: 09/26/2021 - 10/09/2021

Department No.
Employee No. 548
Payroll No.

Date	In	Out	Total	Explanation
09/26/2021		Off	0.00	Reg Day Off
09/27/2021	07:00	15:00	8.00	
09/28/2021	07:00	15:00	8.00	
09/29/2021	07:00	15:00	8.00	
09/30/2021	07:00	15:00	8.00	
10/01/2021	07:00	14:00	7.00	1 Comp Time
10/02/2021		Off	0.00	Reg Day Off
10/03/2021		Off	0.00	Reg Day Off
10/04/2021	07:00	15:00	8.00	
10/05/2021		Off	0.00	8 Funeral Leave
10/06/2021	07:00	15:00	8.00	
10/07/2021	07:00	15:00	8.00	
10/08/2021	07:00	14:00	7.00	1 Vacation Day
10/09/2021		Off	0.00	Reg Day Off

Details				
Date	**Start**	**End**	**Total**	**Explanation**
09/28/2021	18:00	23:00	5.00	Other @1.5Time
09/30/2021	15:30	18:30	3.00	Other @1.5Time
10/01/2021	14:00	15:00	1.00	Comp Time
10/05/2021	07:00	15:00	8.00	Funeral Leave
10/07/2021	15:30	18:30	3.00	Other @1.5Time
10/08/2021	14:00	15:00	1.00	Vacation Day

Type Of Day / Post	Hours	Hours Worked	Hours Scheduled	Overtime	Punch Hours
		70.00	80.00	11.00	0.00

Prior Period				
Date	**Start**	**End**	**Total**	**Explanation**

Closed Period Adjustments				
Date	**Start**	**End**	**Total**	**Explanation**

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_____
Signature of Employee

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Signature of Supervisor

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Signature of Dept Head