

CLS ADMINISTRATOR

**SAVANNAH RIVER SITE  
STRATEGIC AGREEMENT TIME SHEET  
9/80'S - SCHEDULE**

LAST NAME	FIRST	M.I.	WORK SCHEDULE	PERIOD ENDING	DEPARTMENT	ORG. CODE					
1.			2. 9/80	3.	4.	5.					
6. COMPANY NAME ACTS OF SOUTH CAROLINA			7. JOB TITLE		8. SUBCONTRACT NUMBER						
DATE:						TOTAL HRS.					
ACTIVITY CODE	TWC	FRI (PM)	SAT	SUN	MON	TUE	WED	THUR	FRI (AM)	TOTAL	ST/OT
A.											
B.											
C.											
D.											
E.											
F.											
G.											
H.											
TOTAL HOURS											

**INSTRUCTIONS:**

**RECORD ONLY ACTUAL HOURS WORKED ON THIS TIME SHEET.**

1. FILL IN BLOCKS 1 THROUGH 8 WITH THE APPROPRIATE DATA.
2. FILL IN DATE ABOVE DAY OF THE WEEK.
3. FILL IN APPROPRIATE ACTIVITY CODES AND TWC.
4. RECORD DAILY HOURS IN CONJUNCTION WITH DATE, ACTIVITY CODE AND TWC.
  - A. INPUT ACTUAL TOTAL HOURS WORKED FOR THAT DATE.
  - B. AT THE END OF THE WEEK ADD THE DAILY HOURS AND FILL IN THE TOTAL IN THE TOTAL COLUMN.  
OVERTIME WILL BE DETERMINED AFTER THE FINAL WORKDAY OF WEEK. FORTY HOURS OF S/T WILL BE ACCOUNTED FOR, PRIOR TO COUNTING O/T.
  - C. INPUT S/T AND O/T IN THE LAST COLUMN (ST/OT)
5. ALL OVERTIME MUST BE APPROVED BY THE AFR VIA THE OVERTIME AUTHORIZATION SHEET PRIOR TO PERFORMANCE.

**COMMENTS:**

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EMPLOYEE SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_ TEL.EXT. \_\_\_\_\_ LOC \_\_\_\_\_

AFR SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_ TEL. EXT. \_\_\_\_\_ LOC \_\_\_\_\_

POC SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_ TEL. EXT. \_\_\_\_\_ LOC \_\_\_\_\_