

TOWN OF WATERBORO EXEMPT EMPLOYEE TIME SHEET

Employee's Name: _____
Pay Period End Date: _____

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

CODES

W – Work **W/OT** – Work beyond 8 hours in a day
H – Holiday **FL** – Funeral Leave
S – Sick **FO** – Furlough
ST – Storm **CO** – Comp
J – Jury Duty **C/S** – Conference/Seminar
V – Vacation

----- Special Notes -----

Employee Signature: _____ Date: ____ / ____ / ____



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