



## HOURLY TIMESHEET – CURRICULUM DEVELOPMENT

Name of employee: \_\_\_\_\_

Current mailing address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Curriculum development project & number: \_\_\_\_\_

DAY	DATE	BEGAN WORK	STOPPED WORK	TIME HOURS	MINUTES
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
TOTAL:					

Code (For administrator or business office use only): \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of employee

Mail to: Questar III  
Attn: Payroll  
10 Empire State Blvd.  
Castleton, New York 12033

\_\_\_\_\_  
Signature of administrator