




Daily Employee Timecard
(Report of Time, Premiums)

62-5670 (Rev. 08/07)
Payroll

EMPLOYEE DETAILS		MEAL DETAILS			
TIMEKEEPER GROUP	1639				
EMPLOYEE NAME	[REDACTED]	MISSED MEAL?	N/A	DATE:	7-13-21
EMPLOYEE #	239934	Comments: DAILY HEALTH SURVEY, SHIFT AND TURNOVER			

Notes/Comments	Hours	Abs/Att Type	WR	OT Reas	Shift Prem	Activity Type	RCC	Receiving Order	Oper	Spl	Work Center	Upgrade Job
Rock Creek Switching Center 2020	8				1	PWR PRD	11597	10542581	10		11597	
Rock Creek Switching Center 2020	4	2001		1	1	PWR PRD	11597	10542581	10		11597	
Rock Creek Switching Center 2020				7	1	PWR PRD	11597	10542581	10		11597	
Rock Creek Upgrade Project 2020						PWR PRD	11597	10542582	10		11597	
Operate Cresta Project 2020						PWR PRD	11597	10542416	10		11597	
Operate Poe Project 2020						PWR PRD	11597	10542580	10		11597	
Operate Bucks Creek Project 2020						PWR PRD	11597	10542414	10		11597	
Operate Grizzly Project 2020						PWR PRD	11597	10542417	10		11597	
MISSED MEAL				7	1							
DRIVE TIME												
DRIVE TIME												


I certify that I have accurately recorded any missed meal periods during this pay period on this timecard, and that absent such a recording, I did receive a meal period(s).



 Employee Signature

7-13-21

 Date



Public

Foreman/Supervisor Name

Foreman/Supervisor Signature

Date