

# TIME SHEET



**Midwest Veterans'  
Biomedical Research  
Foundation**  
Smart | Accessible | Evolving

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- **THE SUBMITTED TIME SHEET MUST BE AN ORIGINAL, WITHOUT ERRORS OR CORRECTIONS**
- **EMPLOYEES MUST SIGN, AND SUPERVISOR(S) OR SUPERVISOR DESIGNEE MUST SIGN**
- **TIME SHEETS WILL NOT BE ACCEPTED FOR PROCESSING AFTER NOON ON TUESDAY**
- **INCOMPLETE OR LATE TIME SHEETS WILL NOT BE PROCESSED UNTIL THE FOLLOWING PAY PERIOD**

Name: \_\_\_\_\_ Dates: \_\_\_\_\_ PP: \_\_\_\_\_

WEEK ONE		VA HOURS		FOUNDATION Project 1:				Foundation Project 2:				HOLIDAY	AL	SICK	OT	DAILY
DAY	Date	Time In	Time Out	Time In	Time Out	Lunch	Proj. Total	Time In	Time Out	Lunch	Proj. Total	HRS	Used	Used	HRS	TOTAL
SUN																
MON																
TUE																
WED																
THU																
FRI																
SAT																
				Subtotal Project 1:				Subtotal Project 2:								

*Dual compensation employees must complete shaded VA time section.  
Foundation reported VA time MUST match VA reported VA time.*

WEEK ONE		VA HOURS		Project 1:				Project 2:				HOLIDAY	AL	SICK	OT	DAILY
DAY	Date	Time In	Time Out	Time In	Time Out	Lunch	Proj. Total	Time In	Time Out	Lunch	Proj. Total	HRS	Used	USED	HRS	TOTAL
SUN																
MON																
TUE																
WED																
THU																
FRI																
SAT																
				Subtotal Project 1:				Subtotal Project 2:								
				Total Wks 1 & 2 Hrs												

Employee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Project 1 Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

Project 2 Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

Notes: \_\_\_\_\_ For Office Use Only

Executive Director or Designee: \_\_\_\_\_

Date: \_\_\_\_\_