UNIVERSITY OF CALIFORNIA, DAVIS
EMPLOYEE BIWEEKLY TIME RECORD

Payroll Period: __________________________ through __________________________

Employee Name: ___________________________________________ Employee ID: __________________

Department Name: __________________________________________

<table>
<thead>
<tr>
<th>Week One</th>
<th>Week Two</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sun</td>
<td>Mon</td>
</tr>
<tr>
<td>Time Worked</td>
<td></td>
</tr>
<tr>
<td>Paid Time Off</td>
<td></td>
</tr>
<tr>
<td>Total Paid Time</td>
<td></td>
</tr>
<tr>
<td>FAU:</td>
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<table>
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<tbody>
<tr>
<td>Time Worked</td>
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<tr>
<td>Paid Time Off</td>
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<tr>
<td>Total Paid Time</td>
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<td>FAU:</td>
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<tbody>
<tr>
<td>Time Worked</td>
</tr>
<tr>
<td>Paid Time Off</td>
</tr>
<tr>
<td>Total Paid Time</td>
</tr>
<tr>
<td>FAU:</td>
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</tbody>
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DEPARTMENT USE ONLY - OPTIONAL SUMMARY OF LEAVE TIME PAID

| Vacation Taken | | | | | | | | | | | | | | | | | |
| Sick Lv Taken | | | | | | | | | | | | | | | | | |
| Other | | | | | | | | | | | | | | | | | |

Paid Time Off Codes

<table>
<thead>
<tr>
<th>V</th>
<th>Vacation</th>
<th>REG</th>
<th>SDF</th>
<th>OTS</th>
<th>OTP</th>
<th>TOC</th>
<th>VAC</th>
<th>SKL</th>
<th>CTO</th>
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<tbody>
<tr>
<td>S</td>
<td>Sick Leave</td>
<td>Account #1</td>
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<td>CT</td>
<td>Comp Time Off</td>
<td>Account #2</td>
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<td>H</td>
<td>Holiday Pay</td>
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</tr>
<tr>
<td>J</td>
<td>Jury Duty</td>
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</tbody>
</table>

I hereby certify that the time recorded is correct:

Employee Signature: __________________________ Date: ________________

Supervisor's Signature: __________________________ Date: ________________