

Kentucky-Tennessee Conference



**Local Church/School Payroll Report Form
Part Time Bi-Weekly Payroll**

Report for Pay Period _____ through _____

Employee Name _____

For change of address, complete this section.	
Mailing Address _____	
City/State/Zip _____	

Job Description _____

Pay Per Hour _____

Hours Worked per pay period _____

Vacation Hours per pay period _____

Short Term Sick Hours per pay period _____

See reverse side for important instructions

⇒ Gross Wages (Hours X Rate) _____ . _____

⇒ Employer Share of FICA (7.65% of Gross Wages)..... _____ . _____

⇒ Worker's Compensation (4% of Gross Wages)..... _____ . _____

Complete line below if employee fulfills requirements listed in 7a on reverse side.

⇒ Retirement—Employer Basic (5% of Gross Wages)..... _____ . _____

Complete line below if employee fulfills requirements listed in 7b on reverse side.

⇒ Retirement—Employer Match (3% of Gross Wages)..... _____ . _____

TOTAL AMOUNT DUE TO PAYROLL CENTER..... _____ . _____

Submitting Organization _____

Authorized By _____

Kentucky-Tennessee Conference of Seventh-day Adventists

TIME SHEET To be completed by hourly non-exempt employees

Instructions

1. Non-exempt employees must record their actual time worked and starting/stopping times for each work day. If an employee's working time is [DISCUSS: substantially] interrupted by a partial-day or full work day absence (e.g., medical appointment), the employee must record the actual time of leaving and returning to work.
2. Employees whose scheduled unpaid meal break is interrupted by work must record actual time worked and have that entry initiated by their supervisor.
3. Employees are expected to accomplish their duties within scheduled work hours. Any overtime required to accomplish assigned duties must be approved in advance by the supervisor.

Employee Name: _____															
Location: _____															
Position: _____															
Week 1	_ / _ / _		to		_ / _ / _										
For Week	Please indicate a for a.m. and p for p.m														
Day of Week	Date	Task(s) performed	Start hh:mm	End hh:mm	Start hh:mm	End hh:mm	Start hh:mm	End hh:mm	Start hh:mm	End hh:mm	Start hh:mm	End hh:mm	Enter Any Working Lunch Start hh:mm	End hh:mm	Total hrs.
EXAMPLE:	1-Jan	Bible Studies	09:30a	12:00p											2.5
Thursday															
Friday															
Saturday															
Sunday															
Monday															
Tuesday															
Wednesday															
Total Hrs Worked Week 1: _____															
Week 2	_ / _ / _		to		_ / _ / _										
For Week															
Day of Week	Date	Task(s) performed	Start hh:mm	End hh:mm	Start hh:mm	End hh:mm	Start hh:mm	End hh:mm	Start hh:mm	End hh:mm	Start hh:mm	End hh:mm	Enter Any Working Lunch Start hh:mm	End hh:mm	Total hrs.
Thursday															
Friday															
Saturday															
Sunday															
Monday															
Tuesday															
Wednesday															
Total Hrs Worked Week 2: _____															

I certify that I have reported on this time sheet all working time during each work week of this payroll period, and that I have not omitted any hours worked, including any overtime hours, from this report. I understand that false, incomplete, misleading, or omitted information on this time sheet can result in termination of employment.

Date _____

Employee Signature _____

Date _____

Supervisor Approval _____

Date _____