

TIME AND EFFORT REPORT

EMPLOYEE NAME:		FISCAL YEAR:	
TITLE:		REPORT PERIOD:	

BUDGETED PAYROLL DISTRIBUTION FOR REPORT PERIOD		ACTUAL EFFORT DISTRIBUTION FOR REPORT PERIOD	
GRANT/FUNDING SOURCE	PERCENTAGES	GRANT/FUNDING SOURCE	PERCENTAGES
	100%		100%
TO BE COMPLETED BY EMPLOYEE, SUPERVISOR, OR RESPONSIBLE OFFICAL		EXPLANATION AS NECESSARY	
<p>If the percentages of actual effort distribution for any grant or funding source differ from the budgeted payroll distribution, please make the corrections before certifying below.</p>			
<p>CONFIRMATION BY</p> <p><input type="checkbox"/> Employee <input type="checkbox"/> Supervisor <input type="checkbox"/> Responsible Official</p>			
<p>I certify that this report represents a reasonable estimate of the actual effort expended on each grant or funding source as listed above for the period covered by this report.</p>			

Signature	Title	Date
Signature	Title	Date