

Appendix #50

Z	B	6889070	163234	CUNDIFF DAVID K			04620202	9915	5477A	022893
DEPT.		COST CENTER		NAT. CLASS		EMPLOYEE NO.		EMPLOYEE NAME		
DAY	REASON CODE	HOURS WORKED	VAR. CODE	HOURS	OTHER HOURS GRANT SCHOOL	REASON CODES				
16	IE	7				<p style="text-align: center;">PAYROLL ONLY</p> <p style="text-align: center;">BONUS CODES</p> <p style="font-size: 1.2em; margin-left: 20px;">Please correct 2/17, 23 + 24 per 2/25 agreement.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="font-size: 1.5em; margin: 0;">David Cundiff</p> <p style="font-size: 0.8em; margin: 0;">EMPLOYEE'S SIGNATURE</p> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px; width: 100px;"> <p style="font-size: 0.8em; margin: 0;">SUPERVISOR'S SIGNATURE</p> </div>				
17	EOH	14								
18	8E	0								
19	3E	5								
20	X									
21	X									
22	8E	0								
23	7OA	10								
24	8OA	9								
25		8								
26		8								
27	X									
28	X									
29										
30										
31										

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