NAME:				CPS ID #:		PROGRAM:			POSITION:	POSITION:	
BUILDING:						MINUTES MUST BE CONVERTED TO DECIMALS					
PAYROLL PERIOD: From: To:											
DAY OF WEEK	A.M.	P.M.	REGULAR TIME	OVERTIME	DAILY TOTAL	REGULAR RATE	**** EOOVERTIME RATE	TOTAL	ACCOUN KEY		
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