

100% Time Reporting Sheet to Capture Administrative Time for Hurricane Katrina Evacuees

Month/Year _____ Worker Name _____ Agency Name _____

Day of the month

Activity	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Assisting Katrina Evacuees																															
All Other																															
Leave																															
Total Hours																															

Instructions:

Please record 100% of your time each day of the month.

When spending time assisting the Hurricane Katrina evacuees, please record this time as an "Assisting Katrina Evacuees" activity.

When spending time assisting other clients or performing other activities, please record this time as an "All Other" activity.

When on paid leave, such as vacation or sick leave, please record this time as a "Leave" activity.

100% of your time for the month must be recorded on this time sheet. Not just the time you spent assisting the Hurricane Katrina evacuees.

For questions on how to complete this time sheet, please contact _____.

Employee Signature _____

Date _____

Supervisor Signature _____

Date _____