TIME SHEETS ARE DUE NO LATER THAN CLOSE OF THE LAST BUSINESS DAY OF THE PAY PERIOD. TIME SHEETS NOT RECEIVED WILL RESULT IN PARTICIPANT NOT BEING PAID UNTIL THE FOLLOWING PAY PERIOD. NO EXCEPTIONS.

Please email to: aglover@m4a.org or fax to: 1-866-890-0374

SENIOR PARTICIPANT & WORKERS EMPLOYMENT PROGRAM TIME SHEET

Participant:

Assignment Title: **Hourly Rate** **$12.00**

Name of Host Agency:

PAYROLL BEGINNING DATE		PAYROLL ENDING DATE	
Tuesday, June 16, 2026		Tuesday, June 30, 2026	

DAY	Community Service Hours Worked	Federal Holiday Hours	Training (meeting) Hours	Total Paid Hours	Host Agency Supervisor Hours/Day
Tuesday, June 16, 2026					
Wednesday, June 17, 2026					
Thursday, June 18, 2026					
Friday, June 19, 2026					
Saturday, June 20, 2026					
Sunday, June 21, 2026					
Monday, June 22, 2026					
Tuesday, June 23, 2026					
Wednesday, June 24, 2026					
Thursday, June 25, 2026					
Friday, June 26, 2026					
Saturday, June 27, 2026					
Sunday, June 28, 2026					
Monday, June 29, 2026					
Tuesday, June 30, 2026					
TOTALS					

The undersigned hereby certifies that the reporting information is correct for the payroll period indicated.

FAX NUMBER: 1-866-890-0374

Participant Signature _____ DATE _____

Host Agency Supervisor Signature _____ DATE _____

For Program Director Use Only

Total hours for pay this period _____

Payment approved by: _____