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**

Name of Host Agency:

PAYROLL BEGINNING DATE		PAYROLL ENDING DATE	
Wednesday, September 16, 2026		Wednesday, September 30, 2026	

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