

Copy of Time Card Report

Previous Month (03/01/23 to 03/31/23)

Spring Valley, Nursing Assistants, Resident Assistant

Full Name (Last, First)	Last Name		vertime		Hours		
Mocanu, Aliona	Mocanu				0:00		
Date	In	Out	In	Out	Amount	Schedule	Exceptions
03/01/23							
03/02/23							
03/03/23							
03/04/23							
03/05/23							
03/06/23							
03/07/23							
03/08/23							
03/09/23							
03/10/23							
03/11/23							
03/12/23							
03/13/23	7:59	16:33			8:00	Unsch	
03/13/23					8:00	Regular	
03/14/23							
03/15/23							
03/16/23							
03/17/23							
03/18/23							
03/19/23							
03/20/23							
03/21/23							
03/22/23							
03/23/23							
03/24/23							
03/25/23							
03/26/23							
03/27/23							
03/28/23							
03/29/23							
03/30/23							
03/31/23							

Pay Desig.	Location, Department, Cost Center	Hours
Regular	Spring Valley, Nursing Assistants, Resident Assistant	8:00
Totals		8:00

Employee Signature

_____ **0:00**

_____ **0:00**