OVERHEAD PAYROLL SHEET

Name_____ **Date** _____/ _____ /**20**_____

Location (*circle one*) Charlottesville Lexington Maryland Richmond Va. Beach Other

Start 1 _____am pm **End 1** _____am pm **Start 2** _____am pm **End 2** _____am pm

Work performed:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Approved By_____ **Job/Customer** _____

**********************************PAYROLL DEPARTMENT USE**********************************

Pay type	Overhead Rate	# of Hours	Total Payroll
Regular			**$**
Other			**$**