

Gateways Community Services Biweekly Timesheet

Payroll Period End Date (<i>Friday Midnight</i>):	* REMINDER * All timesheets are DUE by 9 AM on Monday after each Pay Period Ending Date	Date Received Stamp:
Employee Name (<i>Print Name</i>):		<i>Dept. Approval:</i>
Employee Signature:		
Supervisor Signature:		
Program Code:		

DAY	DATE (MM/DD/YY)	Time In Hours	AM PM (circle)		Time Out Hours	AM PM (circle)	Regular Hours	Earned Time	Holiday Hours	Sleep Hours	OT Hours	Hours	Training (Circle)		Travel Hours	Client Code/ Cost Center	
			Relias	Other													
Sat			AM	PM		AM	PM							Relias	Other		
Sat			AM	PM		AM	PM							Relias	Other		
Sun			AM	PM		AM	PM							Relias	Other		
Sun			AM	PM		AM	PM							Relias	Other		
Mon			AM	PM		AM	PM							Relias	Other		
Mon			AM	PM		AM	PM							Relias	Other		
Tues			AM	PM		AM	PM							Relias	Other		
Tues			AM	PM		AM	PM							Relias	Other		
Wed			AM	PM		AM	PM							Relias	Other		
Wed			AM	PM		AM	PM							Relias	Other		
Thurs			AM	PM		AM	PM							Relias	Other		
Thurs			AM	PM		AM	PM							Relias	Other		
Fri			AM	PM		AM	PM							Relias	Other		
Fri			AM	PM		AM	PM							Relias	Other		

FIRST WEEK TOTALS

This is a Legal Document. Please initial any changes or corrections. DO NOT use white out or pencil.

Sat			AM	PM		AM	PM							Relias	Other		
Sat			AM	PM		AM	PM							Relias	Other		
Sun			AM	PM		AM	PM							Relias	Other		
Sun			AM	PM		AM	PM							Relias	Other		
Mon			AM	PM		AM	PM							Relias	Other		
Mon			AM	PM		AM	PM							Relias	Other		
Tues			AM	PM		AM	PM							Relias	Other		
Tues			AM	PM		AM	PM							Relias	Other		
Wed			AM	PM		AM	PM							Relias	Other		
Wed			AM	PM		AM	PM							Relias	Other		
Thurs			AM	PM		AM	PM							Relias	Other		
Thurs			AM	PM		AM	PM							Relias	Other		
Fri			AM	PM		AM	PM							Relias	Other		
Fri			AM	PM		AM	PM							Relias	Other		

SECOND WEEK TOTALS

TOTALS FOR BOTH WEEKS

<i>Office Use Only:</i>																			

Round to nearest quarter hour:

15 mins = 0.25
30 mins = 0.50
45 mins = 0.75

How to Submit Timesheets

Fax to: (603) 459-2726

Front Desk 8:30-4:30 M-F or Red Lock Box 24/7

Drop off/Mail

144 Canal Street, Nashua, NH 03064

Scan & Email by Program Code: Starting with:

**CDS: cdsclaims@gatewayscs.org (I00, I0W, J0J, R00, L00)*

**Caregivers/VIP: fmtimesheets@gatewayscs.org (M00 or V00)*