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Division:

Title:

THE CITY OF NEW YORK LAW DEPARTMENT

Time Record

Wee	k	Er	di	na.
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Week Ending:							2.	
DATE	Sunday	Monday	Tuesday	Wednesday	Thursday	Fnday	Salurday	TOTAL
Time Arrived								
Time Departed								
Actual Number of Hours Worked						-		
,	CHA	ARGES T	O LEAVE	BALANCE	S			
Annual Leave								
Sick Leave: Documentation attached? YesNo				e		lit.		
Floating Holiday								
Compensatory Time								
Authorized Absence: Please explain in Comments								
* Comments:								
I hereby Certify that the time shown co attendance and activities for the week		esents my						
Employee's Signature	Date	A	pproved: D	ivision or Bur	eau Head		Date	
	Record	your bill	able time	in this se	<u>ction</u>			
Activity Codes A - Administrative tasks B - Brief/Motion Practice C - Conference D - Discovery	G – H –	File review Court App Correspon Phone Con	earance dence		R – Re S – Se T – Tria	eadings esearch ttlement al Prepara scellaneou		

For e	ach billable c	ase, summa	rize daily hou	rs in quarter-	hour increme	nts using NY	CLIS # and	activity code	
Billable activity NYCLIS#	Activity Code	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	For data entry us
		79	_ =	:5					
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