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| **<INSERT ORGANIZATION NAME>**  |
|  |  |  |  |  |
| **EMPLOYEE NAME (PRINTED):** |   | **UNIT # or GRANTEE NAME:** |  |
| **LOCATION:** |   | **PAY PERIOD DATES:** |   |
|  |  |  |  |  |
|  |  |  |  |
| **DATE** | **JOB/FUNCTION (Ex. Tutor)** | **ACCOUNT CODE (Ex. 5350.198)**  | **TIME/HOURS** |
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|   |  |   |   |
|   | TOTAL HOURS |   |

I hereby certify that the information contained in this Time and Effort Report accurately reflects my actual time and effort (T&E) distribution for the period reported. My time is \_\_\_\_\_% dedicated to the 21st CCLC grant.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Employee Signature Employee Printed Name Date

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 Supervisor Signature Supervisor Printed Name Date