

**AIHEC
Payroll Time Sheet
Period Ending**

Name	CODE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	Totals	
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15		
GRANT NAME	CODE																	
Central Office (Core)	100																0.00	100
Advocacy	120																0.00	120
Development	125																0.00	125
Student Congress	130																0.00	130
Tribal College Journal	140																0.00	140
BIE Technical Assistance	200																0.00	200
NARCH BIRCH	416																0.00	416
IPERT	423																0.00	423
DOD - Forge the Future	425																0.00	425
USDA OASDFR 2501	432																0.00	432
USDA OASDFR	433																0.00	433
VISTA CNCS	428																0.00	428
NRCS Partnership for Workforce Development	434																0.00	434
DOE Advanced Manufacturing	441																0.00	441
NSF Piloting a CI-Enabled TCU Research Collaboration	482																0.00	482
NSF - TCU Advanced Manufacturing Technician Education Network	486																0.00	486
NSF Advanced Manuf Network Meeting	487																0.00	487
NSF Native Fews Alliance (includes)	488																0.00	488
NSF EAGER Cybersecurity Project	489																0.00	489
AIHEC SWACASC Tribal Climate Resilience Liaison Partnership	497																0.00	497
A*CF AIMS Data Services	701																0.00	701
VISTA CNCS Cost Sharing	706																0.00	706
William and Flora Hewlett Foundation	713																0.00	713
Mellon Native Language Initiative	716																0.00	716
EXCITE	718																0.00	718
BMGF AFP Initiative	719																0.00	719
National Endowment for the Humanities	721																0.00	721
Bay and Paul Foundation	723																0.00	723
BMGF Gates	729																0.00	729
01 Achieving the Dream	731																0.00	731
General Motors	733																0.00	733
NASPA	735																0.00	735
SUBTOTALS		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

LEAVE & OTHER TIME		WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	Totals	
Annual Leave (attach Approved Leave Form)																	0.00	AL
Sick Leave (attach Approved Leave Form)																	0.00	SL
Holiday (Federal Holiday Observed only)																	0.00	HO
Other (i.e. Office Closed, Flex, etc.)																	0.00	O
Leave Without Pay																	0.00	LWP
SUBTOTALS		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

TOTALS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
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Employee Signature _____ Date _____

Supervisor Signature _____ Date _____

NOTES: **variance**