

**SPECIAL CONSULTANT VOUCHER**

An approved timesheet is required before any payment can be made. Such timesheet must be submitted to Human Resources at the end of each pay period in order to ensure timely payment. For assignments spanning more than one pay period, a separate timesheet will be required for each pay period. Taxes will automatically be withheld from each payment.

**Consultant's Name:** \_\_\_\_\_

**Department Name:** \_\_\_\_\_

**Prepared by:** \_\_\_\_\_ **Ext.** \_\_\_\_\_

<b>Class Code:</b>			
<b>Employee ID:</b>		<b>Position Number:</b>	
<b>Pay Period (month/year):</b>		<b>Daily or Hourly Rate:</b>	

Date	No. of Days/Hours Worked	Date	No. of Days/Hours Worked	Date	No. of Days/Hours Worked
31		11		22	
1		12		23	
2		13		24	
3		14		25	
4		15		26	
5		16		27	
6		17		28	
7		18		29	
8		19		30	
9		20		31	
10		21		1	

**Total Days/hours:** \_\_\_\_\_

I certify that I have worked the days recorded on this voucher.

**Consultant:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Print Name Signature

I authorize the period worked by this employee and have personal knowledge of the accuracy of the time to which they have certified.

**Supervisor:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Print Name Signature

**Appropriate Administrator:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Print Name Signature