



# City of El Paso Grant Daily Activity Log

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_

Pay Period: \_\_\_\_\_ through: \_\_\_\_\_  
 Employee ID: \_\_\_\_\_

## Grant Programs

ACTUAL HOURS WORKED	Date	Prog A	Prog B	Prog C	Prog D	Prog E	Vac	Sick	Total Hours
	Monday								
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									
Sunday									
Monday									
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									
Sunday									
	<b>SUM</b>								

This information is an accurate reflection of the hours worked on the above grant programs for the period stated above.

(Employee Signature)	/ / (Date)
(Supervisor Signature)	/ / (Date)