R&T - D

Personnel Activity Report

Texas Council for Developmental Disabilities Personnel Activity Report

Reporting Period

Employee Information					
Name		Grant No. DD-		Budgeted	Hours / %
Position/Title			Pay Periods	Included	
List of Activities Described in Approved Position Description DD hours or % Non-DD hours or %					
Described in Approved Position Description			DD houi	s or %	Non-DD hours or %
I hereby affirm that the above listed activities represent, to the best of my knowledge, a reasonable estimate of the distribution of compensable effort for the reporting period listed above.					
Signature of Employee Date		Signature of Supervisor Date			