

**ABC Organization
Monthly Time & Effort Report**

Month/Year: _____

Employee Name: _____

From Payroll System/Appointment Documents (**Budgeted**):

Project/Activity	% of Effort
Project 1	
Project 2	
Project 3	
Membership Activities	
Fundraising	
Administration	
Bid and Proposal	
Total	100%

From Accounting System (**Actual Effort**):

Project/Activity	% of Effort
Project 1	
Project 2	
Project 3	
Membership Activities	
Fundraising	
Administration	
Bid and Proposal	
Total	100%

NOTE: If Actual Effort expended on activities differs from Budgeted effort, please make changes to the effort percentages and submit to the Payroll Department to post correcting accounting entries. Make all changes in ink. The Time & Effort Report must reflect actual effort. Federal awards may not be charged in excess of actual effort.

Employee Name

Employee Signature Date

Supervisor Name

Supervisor Signature Date