

Demo Client

Employee Schedule

1/25/08 - 1/31/08

Name: **Johnson, Jane**

Other ID: **JJ-391**

Card ID: **1004**

Home Dept: **100**

Shift No: **1**

Schedule No: **1**

Schedule Name: **Office Schedule**

	01/25	01/26	01/27	01/28	01/29	01/30	01/31
Optional:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Start Time:		8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM	
End Time:		5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM	
Lunch Amt:		1.00	1.00	1.00	1.00	1.00	
Daily Totals:	0.00	8.00	8.00	8.00	8.00	8.00	0.00
						WeeklyTotal	40.00

Demo Client

Employee Schedule

1/25/08 - 1/31/08

Name: **Smith, Fred**

Other ID: **FS-548**

Card ID: **1003**

Home Dept: **200**

Shift No: **1**

Schedule No: **2**

Schedule Name: **Customer Service**

	01/25	01/26	01/27	01/28	01/29	01/30	01/31
Optional:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Start Time:		7:00 AM	7:00 AM	7:00 AM	7:00 AM	7:00 AM	7:00 AM
End Time:		5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM
Lunch Amt:		1.00	1.00	1.00	1.00	1.00	1.00
Daily Totals:	0.00	9.00	9.00	9.00	9.00	9.00	9.00
						WeeklyTotal	54.00

Demo Client

Employee Schedule

1/25/08 - 1/31/08

Name: **Doe, John**

Other ID: **JD-542**

Card ID: **1002**

Home Dept: **300**

Shift No: **1**

Schedule No: **3**

Schedule Name: **After Hours**

	01/25	01/26	01/27	01/28	01/29	01/30	01/31
Optional:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Start Time:		5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM	
End Time:		10:00 PM	10:00 PM	10:00 PM	10:00 PM	10:00 PM	
Lunch Amt:		0.50	0.50	0.50	0.50	0.50	
Daily Totals:	0.00	4.50	4.50	4.50	4.50	4.50	0.00
						WeeklyTotal	22.50