

**HUNTER COLLEGE OF THE CITY OF NEW YORK
NON-TAX LEVY BI-WEEKLY ATTENDANCE REPORT**

Account Name _____ Payroll No. _____ Due Date _____

Account Number _____ Period Covered _____

NAME AND TITLE	DATES OF SERVICE	TOTAL NUMBER OF HOURS	RATE OF PAY	TOTAL AMOUNT DUE

Return to Cash Management
Room Number East 1602

Authorized Account Signatory