

DEPARTMENT OF PUBLIC SAFETY
GRANTS MANAGEMENT BUREAU (GMB)
PERSONNEL ACTIVITY REPORT (PAR)

For Pay Period: From _____ To _____ (Include only one pay period per report)

Sub-recipient: _____

Sub-grant # : _____

Purpose of Expenditure: Match Expenditure Sub-grant Expenditure

EMPLOYEE INFORMATION

Employee Name: _____

Department / Organization _____ Position: _____

Salary / Wage _____	Hourly Pay Rate _____	Overtime Rate @ 1 to 1.0
		Overtime Rate @ 1 to 1.5

OVERTIME HOURS

Overtime Hours Applicable to the Sub-grant:

Sub-grant overtime hours @ 1 to 1.0 _____ Hours _____

Sub-grant overtime hours @ 1 to 1.5 _____ Hours _____

Total Overtime Salary / Wages Applicable to the Sub-grant _____

REGULAR WORK HOURS (only required if position is funded by a grant)

Subgrant Regular Work Hours _____ Hours _____

EMPLOYEE BENEFITS

Benefits Applicable to **Sub-grant** for **Regular** Hours Worked = _____

Benefits Applicable to **Sub-grant** for **Overtime** Hours Worked = _____

BRIEF DESCRIPTION OF WORK

I certify that this distribution of time or effort represents the actual time (effort) expended by me during the period cover by this report.

Employee Signature

Supervisor Signature

DPS/GMB will not accept any forms other than those provided to the Sub-grantees. If the PAR forms are submitted with alterations DPS/GMB will deny the request.