

## **DEPARTMENT OF TRANSPORTATION**

## PERSONAL SERVICES BREAKDOWN

NDOT - Highway Safety Office PO Box 94612 Lincoln, Nebraska 68509-4612 (402) 471-2515

Contractor:				Contractor Title:					Contract Number:			
Number of Hours for Month:												
									Miscellaneous Expenses			
Pay Period Time	Name / FTE % as Per Contract	Hourly Wage	Number of Hours Worked	Maximum Reimbursable Hours this Month Based on FTE %	Reimbursable Wage	Retirement	FICA	Unemployment				Total Compensation
										Grand Total		

Employee / Employee(s) Signature (s)

Date

Submit Original Copy to NDOT - Highway Safety Office to receive Reimbursement - MAKE COPY FOR YOUR AGENCY