

Tax Year:		Client Name:			
		Resident City:			
	City 1	City 2	City 3		
City Name				Nonwork Days	Total All Days
	Days Worked	Days Worked	Days Worked	PTO/Sick/Vaca	
January					
February					
March					
April					
May					
June					
July					
August					
September					
October					
November					
December					
Totals					
Verify					