

WEEKLY TIME SHEET

Employee Name:

Job Title:

Department:

Number:

Location:

Social Security:

Period from:

To:

| | MON | TUE | WED | THUR | FRI | SAT | SUN |
|----------|-----|-----|-----|------|-----|-----|-----|
| Time out | | | | | | | |
| Time out | | | | | | | |
| Time out | | | | | | | |
| Time out | | | | | | | |
| Time out | | | | | | | |
| Time out | | | | | | | |
| | | | | | | | |

SUMMARY

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|-----------|---------|----------|--------|--------------|-------|
| | Regular | Overtime | Totals | Signature: | Date: |
| Pay Scale | | | | Approved By: | Date: |