

Timesheet 20____-20____



Employee: _____
 Position _____
 Location _____ EMP ID# _____

Business Office Use Only:
 Payroll Ending Date _____
 Payroll Date _____

Week 1	Date	Start Time	End Time	Regular Hours	Start Time	End Time	Overtime Hours (over 40 hrs)	Snow Day ? (hourly only)	Reason for Overtime / Work Performed
Wed									
Thurs									
Fri									
Sat									
Sun									
Mon									
Tues									

Week 2	Date	Start Time	End Time	Regular Hours	Start Time	End Time	Overtime Hours (over 40 hrs)	Snow Day ? (hourly only)	Reason for Overtime / Work Performed
Wed									
Thurs									
Fri									
Sat									
Sun									
Mon									
Tues									

Business Office Use Only:

Employee Signature _____ Date _____

Supervisor Signature _____ Date _____

Total Regular Hrs:			
Total Overtime Hrs:			

Total Pay: _____

Account Code _____