WEEKLY TIME SHEET

Employee Name:

Department:

Date	Start Time	Start Lunch	End Lunch	End Time	Regular Hrs.	Overtime Hrs.	Total Hrs.
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
							0
					0	0	0

Employee Signature: Date:

Supervisor Signature: Date:

Pay period _____ to _____