



# WEEKLY / MONTHLY TIME SHEET

EMPLOYEE NAME:	DEPARTMENT:
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<b>WEEK 1</b>	DATE	HOURS
SUNDAY		
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		
<b>WEEKLY TOTALS:</b>		

<b>WEEK 3</b>	DATE	HOURS
SUNDAY		
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		
<b>WEEKLY TOTALS:</b>		

<b>WEEK 2</b>	DATE	HOURS
SUNDAY		
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		
<b>WEEKLY TOTALS:</b>		

<b>WEEK 4</b>	DATE	HOURS
SUNDAY		
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		
<b>WEEKLY TOTALS:</b>		

<b>WEEK 5</b>	DATE	HOURS
SUNDAY		
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		
<b>WEEKLY TOTALS:</b>		

<b>TOTAL HOURS:</b>	
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EMPLOYEE SIGNATURE:		DATE:
EMPLOYER SIGNATURE:		DATE:

