Employee: _____ **Company:** _____

Week starting: _____

Timesheet

Day	Date	Clock in	Lunch out	Lunch in	Clock out	Total hours
Mon						
Tue						
Wed						
Thu						
Fri						
Sat						
Sun						
Week 1 total hours						

Regular hours: ____ Overtime hours: ____ Rate: $____

Employee signature / date

Supervisor signature / date