

TIME SHEET

Employee Name: _____

I CERTIFY THIS TIME TO BE CORRECT.

Pay Period Ending Month-Day-Year

EMPLOYEE'S SIGNATURE

DAY	AM		PM		TIME	REASON
	IN	OUT	IN	OUT		
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
TOTAL						

I HAVE REVIEWED THE ABOVE
TIME SHEET AND HAVE FOUND
IT TO BE ACCURATE.

SUPERVISOR'S SIGNATURE

****ANY WORK DONE BEYOND REGULAR WORK HOURS (OVERTIME) MUST BE PRE-APPROVED BY THE SUPERINTENDENT!****