

Weekly Employee Timesheet

Company Name

Address 1

Address 2

City, State ZIP

(000) 000-0000

www.com pany-name .com

Employee Name: _____

Supervisor Name: _____

Week of: 6/24/2019

Day of Week	Regular [h]:mm	Overtime [h]:mm	Sick [h]:mm	Vacation [h]:mm	Holiday [h]:mm	Unpaid Leave	Other [h]:mm	TOTAL [h]:mm
Mon 6/24								0:00
Tue 6/25	8:00	2:15						10:15
Wed 6/26								0:00
Thu 6/27								0:00
Fri 6/28								0:00
Sat 6/29								0:00
Sun 6/30								0:00
Total Hrs:	8:00	2:15	0:00	0:00	0:00	0:00	0:00	10:15
Rate/Hour:	15.00	23.00	15.00	15.00	15.00	0.00	0.00	
Total Pay:	120.00	51.75	0.00	0.00	0.00	0.00	0.00	\$ 171.75

Total Hours Reported (h:mm): 10:15

Total Pay: \$171.75

Employee Signature Date

Supervisor Signature Date