

Employee Name:		Title:	
Manager Name:		Month:	
Hourly Rate:		Overtime Rate:	

Date	Start Time	Lunch Start	Lunch End	End Time	Regular Hours	Overtime Hours	Total Hours
1st							0
2nd							0
3rd							0
4th							0
5th							0
6th							0
7th							0
8th							0
9th							0
10th							0
11th							0
12nd							0
13th							0
14th							0
15th							0
16th							0
17th							0
18th							0
19th							0
20th							0
21st							0
22nd							0
23rd							0
24th							0
25th							0
26th							0
27th							0
28th							0
29th							0
30th							0
31st							0
Total Time					0	0	0
Total Pay					\$ -	\$ -	\$ -

Employee Signature: _____

Date: _____

Manager Signature: _____

Date: _____