TIME SHEET

Employee Name: Employee Number: Department:			Title: Status: Supervisor:								
Data	Ot and Times	For d Time a	Do mulan Una	Occarding a Hina	Tatalillas						
Date	Start Time	End Time	Regular Hrs.	Overtime Hrs.	Total Hrs.						
WEEKLY TOTALS:											
Employee Signature:			Date:								
Supervisor Signature:			Date:								