EMPLOYEE TIMESHEET

Multiple Hourly Pay Rates

Document No:
Pay Period:

Employee Name _____

Employee ID _____

Department _____

Manager / Supervisor _____

Period Start Date _____

Period End Date _____

DATE	DAY	TASK / JOB DESCRIPTION	RATE DESIGNATION (E.G. REGULAR, OT, ROLE B)	HOURS WORKED	HOURLY RATE ($)	TOTAL GROSS ($)
			Totals:			

Employee Signature

Date: _____

Supervisor Approval Signature

Date: _____