WEEKLY TIMESHEET

Employee Name _____

Employee ID _____

Department _____

Manager / Supervisor _____

Pay Period Start _____

Pay Period End _____

Day	Date	Regular Hours	Overtime Hours	Sick Leave	Vacation	Total Hours
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
Total Hours						

Hourly Rate	
Regular Pay	
Overtime Rate	
Overtime Pay	
Other Pay (Sick/Vac)	
Gross Pay	

_____

Employee Signature & Date

_____

Supervisor Signature & Date