Time Sheet

Employee Name _____ Company _____

Employee # _____ Week Ending _____

Cost Code	Description of Work	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday		TOTALS	
		RT	OT	RT	OT	RT	OT	RT	OT	RT	OT	RT	OT	RT	OT	RT	OT
																0	0
																0	0
																0	0
																0	0
																0	0
																0	0
																0	0
																0	0
																0	0
																0	0
TOTAL HOURS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0		0		0		0		0		0		0		0	

Employee Signature _____ Date: _____