

EMPLOYEE WEEKLY TIMESHEET

Name:	
Company:	
Supervisor:	

Date:	Location	Start	Lunch	Finish	Hours	Signature
Mon						
Tues						
Wed						
Thurs						
Fri						
Sat						
Sun						
			Total Hours:			

SIGNED BY SUPERVISOR: _____ DATE: _____

Timesheets are the responsibility of the employee to return to head office, signed by the supervisor. Timesheets are to be signed by the supervisor daily