**MONTHLY TIMESHEET**

Month: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Employee name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Hourly rate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Day of** | **Start  Time** | **Lunch**  **Start** | **Lunch**  **End** | **End  Time** | **Vacation** | **Regular Hours** | **Overtime Hours** | **Hours**  **Worked** |
| 1st |  |  |  |  |  |  |  |  |
| 2nd |  |  |  |  |  |  |  |  |
| 3rd |  |  |  |  |  |  |  |  |
| 4th |  |  |  |  |  |  |  |  |
| 5th |  |  |  |  |  |  |  |  |
| 6th |  |  |  |  |  |  |  |  |
| 7th |  |  |  |  |  |  |  |  |
| 8th |  |  |  |  |  |  |  |  |
| 9th |  |  |  |  |  |  |  |  |
| 10th |  |  |  |  |  |  |  |  |
| 11th |  |  |  |  |  |  |  |  |
| 12th |  |  |  |  |  |  |  |  |
| 13th |  |  |  |  |  |  |  |  |
| 14th |  |  |  |  |  |  |  |  |
| 15th |  |  |  |  |  |  |  |  |
| 16th |  |  |  |  |  |  |  |  |
| 17th |  |  |  |  |  |  |  |  |
| 18th |  |  |  |  |  |  |  |  |
| 19th |  |  |  |  |  |  |  |  |
| 20th |  |  |  |  |  |  |  |  |
| 21st |  |  |  |  |  |  |  |  |
| 22nd |  |  |  |  |  |  |  |  |
| 23rd |  |  |  |  |  |  |  |  |
| 24th |  |  |  |  |  |  |  |  |
| 25th |  |  |  |  |  |  |  |  |
| 26th |  |  |  |  |  |  |  |  |
| 27th |  |  |  |  |  |  |  |  |
| 28th |  |  |  |  |  |  |  |  |
| 29th |  |  |  |  |  |  |  |  |
| 30th |  |  |  |  |  |  |  |  |
| 31st |  |  |  |  |  |  |  |  |
| **MONTHLY TOTALS** | | | | | |  |  |  |
| **TOTAL PAY** | | | | | |  | | |

|  |  |
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| Employee signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Supervisor signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |