TIME CARD

EMPLOYEE	COMPANY	PAY PERIOD

DAY	DATE	IN	OUT	HOURS
MON				
TUE				
WED				
THU				
FRI				
SAT				
SUN				
			TOTAL HOURS	

REGULAR HOURS	OVERTIME HOURS	HOURLY RATE	GROSS PAY

NOTES

Employee signature _____ Date _____

Supervisor signature _____ Date _____