TIME CARD

EMPLOYEE	COMPANY	PAY PERIOD

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

REGULAR HOURS	OVERTIME HOURS	HOURLY RATE	GROSS PAY

Employee signature _____ Date _____ Supervisor signature _____ Date _____

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