EARLY

Monthly Timesheet

Name: ....   **Start date:** ....

Department: ....   **Regular hrs:** ....

Supervisor: ....   **Hourly rate:** ....

Day	Start time	Finish time	Break (h)	Regular hours	PTO (h)	Sick (h)	Overtime (h)	Total hours
MONTHLY TOTALS								
HOURLY RATE								
MONTHLY TOTAL PAY								

....   _____

Employee signature   **Date**   **TOTAL MONTHLY HOURS**

....   _____

Supervisor signature   **Date**   **TOTAL MONTHLY PAY**

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