

Town Of Hebron Employee Time Sheet

Department: _____
 Employee Name: _____
 Pay Period: _____

Date	Day of Week	Time in (1)	Time out (1)	Total	Time in (2)	Time out (2)	Total	total day Hrs	Comments
	Sunday								
	Monday								
	Tuesday								
	Wednesday								
	Thursday								
	Friday								
	Saturday								

Week 1 Total Hrs:

Date	Day of Week	Time in (1)	Time out (1)	Total	Time in (2)	Time out (2)	Total	total day Hrs	Comments
	Sunday								
	Monday								
	Tuesday								
	Wednesday								
	Thursday								
	Friday								
	Saturday								

Week 2 Total Hrs:

Date	Day of Week	Time in (1)	Time out (1)	Total	Time in (2)	Time out (2)	Total	total day Hrs	Comments
	Sunday								
	Monday								
	Tuesday								
	Wednesday								
	Thursday								
	Friday								
	Saturday								

Week 3 Total Hrs:

Total Hours

Employee Signature _____

Supervisor Signature _____