

Biweekly Employee Timesheet

[Company Name]

[Address 1]
 [Address 2]
 [City, State ZIP]
 [Phone]

Employee Name: _____

Supervisor Name: _____

Week of: _____

Day of Week	Regular Hrs	Overtime Hrs	Sick	Vacation	Holiday	Unpaid Leave	Other	
Sat 12/30								
Sun 12/31								
Mon 1/1								
Tue 1/2								
Wed 1/3								
Thu 1/4								
Fri 1/5								
Sat 1/6								
Sun 1/7								
Mon 1/8								
Tue 1/9								
Wed 1/10								
Thu 1/11								
Fri 1/12								
Total Hrs:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Rate/Hour:	15.00	23.00	15.00	15.00	15.00	0.00	0.00	
Total Pay:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Total Hours Reported:								0.00
Total Pay:								0.00
