# Time Sheet

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| --- | --- |
| Employee Number |  |
| Employee Name |  |
| Week Ending |  |

Please enter the number of hours worked each day in the appropriate column. Round up to the nearest quarter hour.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |