

EMPLOYEE WEEKLY TIMESHEET



Name:	
Site Company:	
Supervisor:	

	Date	Location	Start	Lunch	Finish	Hours	Signature
Mon							
Tues							
Wed							
Thurs							
Fri							
Sat							
Sun							
						Total Hours:	

SIGNED BY SUPERVISOR:		DATE:	
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Timesheets are the responsibility of the **employee** to return to head office, signed by the supervisor. Timesheets are to be signed by the supervisor daily.