

ST. PETER'S EVANGELICAL LUTHERAN CHURCH - TIME SHEET

EMPLOYEE NAME _____

MONTH & YEAR _____

Date	Start Time	End Time	Unpaid Time	Total Regular Hours	Vacation	Sick	Overtime	Other Paid	Total Paid Hours	Comments
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										

HOURS PAID _____

TOTAL PAY PERIOD HOURS _____

HOURS UNPAID _____

CHECK DATE _____

EMPLOYEE SIGNATURE _____