

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
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										

HOURS PAID _____

HOURS UNPAID _____

CHECK DATE _____

TOTAL PAY PERIOD HOURS

EMPLOYEE SIGNATURE _____