



Week Ending 2020 - ____ - ____

Employee Name: _____

| DATE: (mm/dd) | PROJECT NAME | PROJECT # | TIME IN | Lunch minutes | TIME OUT | TOTAL | |
|------------------|--------------|-----------|---------|------------------|----------|-------|---------------|
| FRI | | | | | | | |
| | | | | | | | |
| | | | | | | | Total for Day |
| SAT | | | | | | | |
| | | | | | | | |
| | | | | | | | Total for Day |
| SUN | | | | | | | |
| | | | | | | | |
| | | | | | | | Total for Day |
| MON | | | | | | | |
| | | | | | | | |
| | | | | | | | Total for Day |
| TUES | | | | | | | |
| | | | | | | | |
| | | | | | | | Total for Day |
| WED | | | | | | | |
| | | | | | | | |
| | | | | | | | Total for Day |
| THUR | | | | | | | |
| | | | | | | | |
| | | | | | | | Total for Day |

Employee Signature: _____

TOTAL HOURS FOR WEEK

