

**FIRST UNITED METHODIST CHURCH
EMPLOYEE TIME SHEET**

EMPLOYEE NAME:

Dept. #:

For Pay Period Ending:

<u>DAY</u>	<u>DATE</u>	<u>IN</u>	<u>OUT</u>	<u>IN</u>	<u>OUT</u>	<u>IN</u>	<u>OUT</u>	<u>Total</u>	<u>Reg</u>	<u>OT</u>	<u>Vac</u>	<u>Hol</u>	<u>Sick</u>	<u>Pers</u>	<u>Oth</u>
Wed															
Thu															
Fri															
Sat															
Sun															
Mon															
Tue															
Total															

<u>DAY</u>	<u>DATE</u>	<u>IN</u>	<u>OUT</u>	<u>IN</u>	<u>OUT</u>	<u>IN</u>	<u>OUT</u>	<u>Total</u>	<u>Reg</u>	<u>OT</u>	<u>Vac</u>	<u>Hol</u>	<u>Sick</u>	<u>Pers</u>	<u>Oth</u>
Wed															
Thu															
Fri															
Sat															
Sun															
Mon															
Tue															
Total															
GRAND TOTALS:															

FIRST UNITED METHODIST CHURCH

EMPLOYEE TIME SHEET

Employee Signature:

Date:

P/R:

S/S: