the WOMEN'S FOUNDATION of CALIFORNIA | Women's Policy Institute

Sample Weekly Employee Timesheet

[Company Name]

[Address 1]
[Address 2]
[City, State ZIP]
[Phone]

Employee Name: _____

Supervisor Name: _____

Week of: _____

Day of Week	Regular Hrs	Overtime Hrs	Sick	Vacation	Holiday	Federal Lobbying	State Lobbying	TOTAL Hrs
Sat 1/0								0.00
Sun 1/1								0.00
Mon 1/2								0.00
Tue 1/3								0.00
Wed 1/4								0.00
Thu 1/5								0.00
Fri 1/6								0.00
Total Hrs:	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Total Hours Reported: 0.00

Employee Signature Date

Supervisor Signature Date