

Biweekly Time Sheet for Employees

Office of Economic and Workforce Development

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<http://durhamnc.gov/ich/cb/oewd/Pages/Home.aspx>

Pay period start date: _____

Pay period end date: _____

Employee Name: _____

Employee Work Site: _____

Employee ID#: _____

Site Supervisor: _____

Week One:							
Day	Date	Time In	Lunch Out	Lunch In	Time Out	Reg Hours	Leave/Sick/Off/ Vacation
Saturday							
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							

TOTAL

Week Two:							
Day	Date	Time In	Lunch Out	Lunch In	Time Out	Reg Hours	Leave/Sick/Off/ Vacation
Saturday							
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							

TOTAL

Pay Period Total:

I Hereby Certify that the above entries are an accurate representation of the employee's time worked in this pay period.

Employee signature

Date

Supervisor signature

Date