

Weekly Time Record

Church/School Name _____

Employee Name: _____

Supervisor Name: _____

Employee phone: _____

Day	Date	Time In	Time Out	Time In	Time Out	Time In	Time Out	Total Hours
Sunday								
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								

Week ending Date: _____

Total Hrs.	
Hourly Rate	
Total Pay	

Employee signature Date

Manager signature Date