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Fax# 905-684-8080

PAYROLL TIMESHEET

DATE	JOB NAME & LOCATION	START TIME	FINISH TIME	LESS LUNCH	HOURS WORKED	TRAVEL IF APPVD	TOTAL HOURS
FRIDAY				1/2			
SATURDAY				1/2			
SUNDAY				1/2			
MONDAY				1/2			
TUESDAY				1/2			
WEDNESDAY				1/2			
THURSDAY				1/2			

SUBMIT TIMESHEETS TO THE OFFICE NO LATER THAN ****NOON MONDAYS****

TOTAL

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Office Use					
CODE	REG	O/T	TRAV	HOL	%
TOTALS					

EXP: _____ GROUP: _____ EMP# _____

EMPLOYEE NAME _____

WEEK END / THURSDAY _____