

# WEEKLY TIME SHEET

**Committee Use Only**

Transaction ID: \_\_\_\_\_

\_\_\_\_\_  
(Committee Name)

Employee Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Period Covered: \_\_\_\_\_

Salary/Wage/Fee: \$ \_\_\_\_\_ per: hour | day (circle one)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
Date								
Time In:								
Time Out:								
Hours Worked								
Duties Performed	_____ _____ _____							
Total Hours Worked				Paid Amount				

## VERIFICATION

I hereby affirm that the employee named above has performed the duties, worked the hours, and was paid the amount listed above.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Treasurer Signature

\_\_\_\_\_  
Date

## For Committee Use Only

Paid: \$ \_\_\_\_\_ by cash or check (circle one)      Check Number: \_\_\_\_\_

Paid by:  Committee       Other: \_\_\_\_\_