

Three Rivers Inc.

Time Sheet



Access to Independent Living

Employee # _____

Employee Name _____

Pay Period Beginning _____

Ending _____

Week 1	Date	In	Out	In	Out	In	Out	Hours Worked	PTO	Holiday	O / B	Total Paid Hours
Sunday												
Monday												
Tuesday												
Wednesday												
Thursday												
Friday												
Saturday												
WEEKLY TOTAL												
Week 2	Date	In	Out	In	Out	In	Out	Hours Worked	PTO	Holiday	O / B	Total Paid Hours
Sunday												
Monday												
Tuesday												
Wednesday												
Thursday												
Friday												
Saturday												
WEEKLY TOTAL												
Column Totals:												

Staff Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Instructions for completing timesheet:

Fill in number of hours worked each day, use a / mark to divide benefit time used followed by the proper code:

PTO=Paid time off, B= Bereavement, H = Holiday, O = Other (without pay)

Please note: your supervisor must approve all benefit time used.