

Biweekly Timesheet

Employee Name: _____
Employee ID: _____
Department: _____
Reporting Period: From _____ To _____

Date	Day	Time In	Time Out	Break (hrs)	Regular Hours	Overtime Hours	Total Hours	Remarks
2024-06-03	Mon	09:00	17:00	1	7	0	7	
2024-06-04	Tue	09:00	17:00	1	7	0	7	
2024-06-05	Wed	09:00	17:00	1	7	1	8	Overtime Project
Total					21	1	22	

Employee Signature: _____ Date: _____
Supervisor Signature: _____ Date: _____

Important Notes

- Timesheet must be filled out accurately and submitted on time at the end of each biweekly period.
- Overtime hours require prior approval from supervisor.
- Please ensure all breaks and total hours are correctly recorded.
- Any corrections must be initialed by both employee and supervisor.