**Bi-Weekly Timesheet Company name**

Employee name:

Supervisor:

Period start date:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Start Time** | | **End Time** | **Regular Hours** | **Overtime Hours** | **Total Hours** |
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|  |  | **BI-WEEKLY TOTAL:** | |  |  |  |

I certify that these hours are a true and accurate record of all time worked during the pay period.

Employee signature: Date:

Supervisor signature: Date: