

Central California Conference

Non-Exempt (Hourly) Employee Bi-Weekly Time Record

Period Ending: _____

Actual starting and stopping times for each period worked must be recorded. Lunch and other breaks must conform to legal requirements. Overtime requires supervisor's advance approval in writing.

Name: _____ Job/Position: _____

Workplace: _____ Approval: _____
Supervisor's signature (required)

Week 1							TOTAL	OFFICE USE ONLY	
	IN	OUT	IN	OUT	IN	OUT	HOURS	REGULAR	OVERTIME
SUN									
MON									
TUE									
WED									
THU									
FRI									
SAT									

Week 2							TOTAL	OFFICE USE ONLY	
	IN	OUT	IN	OUT	IN	OUT	HOURS	REGULAR	OVERTIME
SUN									
MON									
TUE									
WED									
THU									
FRI									
SAT									

Hourly pay rate: _____ Total hours worked this pay period:

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I certify that I have reported on this time sheet all working time during each work week for this payroll period, and that I have not omitted any hours worked, including any overtime hours, from this time sheet. I understand that false, misleading, or omitted information on this report can result in termination of employment.

Employee signature: _____ Date: _____

This record must be retained by the employing or supervising entity for a minimum of 3 years.