

# Employee Time Sheet

M T W Th F S  Day

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

Date \_\_\_\_\_

The total time worked per day must equal the totals for each job listed. If maintenance, cleanup, etc. was performed that was not part of a project, check the box next to "NO NAME" and provide an adequate description. If more pieces of equipment were operated per job than space allows, indicate in the "Description" box. If you worked on more projects than this form allows, write the project information in similar format on the back of this form.

Time Start \_\_\_\_\_

Time Stop \_\_\_\_\_

Lunch (Down Time) \_\_\_\_\_

Job #1 Name \_\_\_\_\_ NO NAME 

Job #1 Time \_\_\_\_\_ hours

Description

Equipment Operated	Time (hr)
Manual Labor	
Travel Time	
Gather Equip. & Supplies	

Job #2 Name \_\_\_\_\_ NO NAME 

Job #2 Time \_\_\_\_\_ hours

Description

Equipment Operated	Time (hr)
Manual Labor	
Travel Time	
Gather Equip. & Supplies	

Job #3 Name \_\_\_\_\_ NO NAME 

Job #3 Time \_\_\_\_\_ hours

Description

Equipment Operated	Time (hr)
Manual Labor	
Travel Time	
Gather Equip. & Supplies	

Job #4 Name \_\_\_\_\_ NO NAME 

Job #4 Time \_\_\_\_\_ hours

Description

Equipment Operated	Time (hr)
Manual Labor	
Travel Time	
Gather Equip. & Supplies	