RUNGE ISD TIME SHEET

NAME_____EMPLOYEE #_____

BEGINNING DATE_____ENDING DATE_____BUILDING_____

WEEKDAY	DATE	IN	OUT	IN	OUT	TOTAL HRS	REMARKS
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							
SUNDAY							
WEEKLY TOTALS:							

WEEKDAY	DATE	IN	OUT	IN	OUT	TOTAL HRS	REMARKS
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							
SUNDAY							
WEEKLY TOTALS:							

WEEKDAY	DATE	IN	OUT	IN	OUT	TOTAL HRS	REMARKS
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							
SUNDAY							
WEEKLY TOTALS:							

WEEKDAY	DATE	IN	OUT	IN	OUT	TOTAL HRS	REMARKS
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							
SUNDAY							
WEEKLY TOTALS:							

WEEKDAY	DATE	IN	OUT	IN	OUT	TOTAL HRS	REMARKS
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							
SUNDAY							
WEEKLY TOTALS:							

_____   _____

EMPLOYEE SIGNATURE   SUPERVISOR SIGNATURE