

# ATTENDANCE SHEET

Pay Period: \_\_\_\_\_ to \_\_\_\_\_

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

Employee ID: \_\_\_\_\_

Department: \_\_\_\_\_

Supervisor: \_\_\_\_\_

DATE	TIME IN	BREAK OUT	BREAK IN	TIME OUT	TOTAL HOURS
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**Total Period Hours:**

Employee Signature

Supervisor Approval