Semi-Monthly Timesheet

Month:

Employee name:	Hourly rate:
Title:	Supervisor:

1st half of the Month:

Day of the Month	Start Time	Lunch Start	Lunch End	End Time	Vacation/ Sick Leave	Regular Hours	Overtime Hours	Total Hours
1st								
2nd								
3rd								
4th								
5th								
6th								
7th								
8th								
9th								
10th								
11th								
12th								
13th								
14th								
15th								
SEMI-MONTHLY TOTALS								
TOTAL PAY								

2nd half of the Month:

Day of the Month	Start Time	Lunch Start	Lunch End	End Time	Vacation/ Sick Leave	Regular Hours	Overtime Hours	Total Hours
16th								

17th							
18th							
19th							
20th							
21st							
22nd							
23rd							
24th							
25th							
26th							
27th							
28th							
29th							
30th							
31st							
SEMI-MONTHLY TOTALS							
TOTAL PAY							

Employee signature:		Date:	
Supervisor signature:		Date:	

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