



Non-Exempt (Hourly) Timecard

Employee Name: _____

Timecard Week Ending: _____

REQUIRED ENTRIES

- Start Time/End Time - Work Start and End times
- Meal Start/Meal End - 30 minutes Lunch/Meal must be taken before the end of your 5th hour of work.
- A second meal break must be taken if working over 12 hours, and is taken before the end of the 10th hour of work
- Employee Signature and Date

Second Meal

	MM/DD/YY	Start Time (AM/PM)	Meal Start (AM/PM)	Meal End (AM/PM)	End Time (AM/PM)	Meal Start (AM/PM)	Meal End (AM/PM)	End Time (AM/PM)	Regular Hrs	Overtime Hrs	Double Time Hrs	Total Hrs
MON												
TUES												
WED												
THUR												
FRI												
SAT												
SUN												
TOTAL:												

Employee Certification

I hereby certify under penalty of perjury that I have worked all the hours reported on this timesheet and that I have also received all meals and rest breaks to which I was legally entitled.

I hereby certify that I have not sustained an injury on this assignment. Unless noted on this form, I have not been injured on the job this week.

I understand it is my responsibility to turn in my original time sheet at the end of each week to my Supervisor and/ or office in order for me to be paid for the total weekly hours shown.

This time sheet must be completed and signed by both me and by an authorized representative of the company who can verify the days and hours worked.

Falsification of time records is grounds for disciplinary action, up to and including termination of employment.

Employee Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____