

Town of Readsboro Time Card

Week Ending _____ Name _____ Dept _____

Sunday Date: _____

Daily Tasks	Reg	OT
Sunday Total		

Monday Date: _____

Daily Tasks	Reg	OT
Monday Total		

Tuesday Date: _____

Daily Tasks	Reg	OT
Tuesday Total		

Wednesday Date: _____

Daily Tasks	Reg	OT
Wednesday Total		

Thursday Date: _____

Daily Tasks	Reg	OT
Thursday Total		

Friday Date: _____

Daily Tasks	Reg	OT
Friday Total		

Saturday

Daily Tasks	Reg	OT
Saturday Total		

Weekly Totals	
Reg Hours	_____
OT Hours	_____

I attest that these hours are a true and accurate representation of actual hours worked to the best of my knowledge

Signature of Employee: _____

Supervisor Signature(if applicable): _____