



JOB TIME REPORT

JOB NO. _____

JOB LOCATION _____ PAYROLL WEEK ENDED _____

EMPLOYEE	RECORD OF HOURS								COST			BILLING	
	Date							Total	Rate	Amount		Rate	Amount
1	ST												
	OT												
2	ST												
	OT												
3	ST												
	OT												
4	ST												
	OT												
5	ST												
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6	ST												
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14	ST												
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15	ST												
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16	ST												
	OT												
17	ST												
	OT												
18	ST												
	OT												

EMPLOYEE	RECORD OF HOURS									COST			BILLING		
	Date								Total	Rate	Amount		Rate	Amount	
19	ST														
	OT														
20	ST														
	OT														
21	ST														
	OT														
22	ST														
	OT														
23	ST														
	OT														
24	ST														
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32	ST														
	OT														
33	ST														
	OT														
34	ST														
	OT														
35	ST														
	OT														
36	ST														
	OT														
DATE _____ CHARGE TO JOB NO. _____									TOTALS						
SUBMITTED BY _____															