SHIFTFLOW

MONTHLY TIMESHEET

Company		Month	
Employee		Supervisor	

Hourly rate: _____ OT multiplier: _____ Enter overtime hours manually based on your policy.

Day	Date	Start	End	Break (hrs)	Total hours	Regular	Overtime	Notes
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
31								
TOTALS								

Regular pay _____ **Overtime pay** _____ **Estimated pay** _____

Team member / contractor _____ **Supervisor / client approval** _____ **Date** _____