

# SHORE STAFFING TIME SHEET

Phone: 410-957-2800 • fax: 410-630-7280

YOUR NAME & TITLE: \_\_\_\_\_ Week Ending: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Month Day Year

FACILITY WORKED: \_\_\_\_\_

Day	Date	Time In	Time Out	Meal Break Required 30 minutes	Holiday (see approved holidays)	Approved OT	Charge	Total hours	Initials of supervisor
Sun									
Mon									
Tues									
Wed									
Thurs									
Fri									
Sat									
<b>Weekly Total</b>									

Holidays, if approved, are: New Year's Day, Memorial Day, July 4<sup>th</sup>, Labor Day, Thanksgiving, & Christmas (from 11P – 10:59P)

Time sheets must be signed by supervisor at facility.

Please scan timesheet with Tiny Scanner Application and email to [heather@shorestaffing.com](mailto:heather@shorestaffing.com) and [brianna@shorestaffing.com](mailto:brianna@shorestaffing.com) or fax to 410-630-7280.

Please note your time in military time and round up or down. I.E.: 9:10 would be 9:15. 18:20 would be 18:15.

By signing, I verify that all information on this timesheet is accurate and complete.

**Note:** Payday is on Friday. You must have your timesheet into us by **NOON** on **SUNDAY**.

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: NO NEED TO PUT A COVER SHEET ON YOUR FAX!