

Weekly Timesheet

Employee's name:	Week starting:
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Day	Start Time	End Time	Hours	Rostered Day Off	Statutory Holiday	Annual Leave	Sick Leave	Bereavement Leave	Total Hours
Mon									
Tue									
Wed									
Thu									
Fri									
Sat									
Sun									
Total weekly hours									

Employee's Signature:	Date:
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Manager's Signature:	Date:
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