

West Shore Recreation Employee Time Record								
Date	Day	Position 1:		Position 2:		P1	P2	
		In	Out	In	Out			Daily Hour Total
	Saturday							
	Sunday							
	Monday							
	Tuesday							
	Wednesday							
	Thursday							
	Friday							
	Saturday							
	Sunday							
	Monday							
	Tuesday							
	Wednesday							
	Thursday							
	Friday							
Position Total:								

Employee's Signature: _____

Pay # _____ Time Slip Due: _____

Period: _____ Pay Date: _____

For Office Use Only

Employee: _____ Approved by: _____

Position 1: _____ Total Hours _____

Position 2: _____ Total Hours _____

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