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Daily Time Sheet

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| --- | --- | --- | --- |
| Supervisor Sign. |  | Date: |  |

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| --- | --- | --- | --- |
| Manager Sign. |  | Date: |  |

|  |  |
| --- | --- |
| Employee Name: |  |
| Department: |  |
| Date From |  | Date To: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Employee Name** | **Start Time** | **End Time** | **Regular Hrs.** | **Overtime Hrs.** | **Total Hrs.** |
|  |  |  |  |  |  |
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