

Weekly Employee Timesheet

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Employee Name: _____

Week Start: _____

Mine Site name: _____

Day of Week	Service Job(s) #	Hours	TOTAL Hours
Date			
Date			
Date			
Date			
Date.....			
Date.....			
Date			
Total Hours:			

Office use Only

Employee Signature:
Name: _____

Authorised Supervisor/Manager Signature:
Name: _____

Title: _____

Date: _____

Date: _____