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| --- | --- |
| COMPANY NAMEWrite Company Slogan HereAddress Line 1Address Line 2City, STATE ZIPCOUNTRYTel: (123) 456-7890Fax: (123) 456-7890 | TIME LOG |

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| **Employee Name:** |  | **Employee Number:** |  |
| **Job Title:** |  | **Department:** |  |
| **Supervisor Name:** |  | **Location:** |  |

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| --- | --- | --- | --- | --- | --- |
| **Date** | **Start Time** | **End Time** | **Regular Hours** | **Overtime Hours** | **Total Hours** |
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|  |  | **Weekly Total** |  |  |  |

Employee Signature: Date:

Supervisor Signature: Date: