

FIRST UNITED METHODIST CHURCH OF SANTA ROSA

Hourly Time Sheet for Month of: _____

NAME: _____ S.S. #: - -

Date	Time		Time		Total Hours	Function	Staff Initials
	In	Out	In	Out			

TOTAL HOURS _____

Employee's Signature _____

FOR OFFICE USE ONLY

Total Hours _____ X \$ _____ = \$ _____

Approved By _____

Time sheet must be turned in to Church Staff by no later than the 25th of each month!