

TIMESHEET

Wolf Construction

2202 Wolf Way
West Des Moines, IA 50265

Employee Name:
<i>Please update Address/Phone for <u>recent changes</u> only</i>
Address:

ITEM LEGEND			
F	Framing	T	Trim
S	Siding	M	Safety Meeting
ER	Existing Roof	PTO	Paid Time Off
NR	New Constr. Roof	TT	Travel Time

Date	Time In	Time Out	Time In	Time Out	Job Name	Item	Description	Total	TK Initial
							TOTAL HOURS:		

Extras:

Overnight Travel - Destination:	I was the driver Y/N	I was assigned a company vehicle Y/N	Number of Per Diem days:
Out of Town Travel - Destination:	I was the driver Y/N	I was assigned a company vehicle Y/N	Number of round trips:
Vehicle:	Odometer Reading:	Equipment:	Hours:

*Employee Signature: _____

*Foreman Signature: _____