

BI -WEEKLY TIME CARD

Employee Name: _____

| DAY OF WEEK | CODE* | TIME IN | TIME OUT | TIME IN | TIME OUT | HOURS |
|-----------------------------------|--------------|---------|----------|--|----------|-------|
| MONDAY | | | | | | |
| | | | | | | |
| TUESDAY | | | | | | |
| | | | | | | |
| WEDNESDAY | | | | | | |
| | | | | | | |
| THURSDAY | | | | | | |
| | | | | | | |
| FRIDAY | | | | | | |
| | | | | | | |
| SATURDAY | | | | | | |
| SUNDAY | | | | | | |
| WEEK TOTAL | | | | | | |
| DAY OF WEEK | | TIME IN | TIME OUT | TIME IN | TIME OUT | HOURS |
| MONDAY | | | | | | |
| | | | | | | |
| TUESDAY | | | | | | |
| | | | | | | |
| WEDNESDAY | | | | | | |
| | | | | | | |
| THURSDAY | | | | | | |
| | | | | | | |
| FRIDAY | | | | | | |
| | | | | | | |
| SATURDAY | | | | | | |
| SUNDAY | | | | | | |
| WEEK TOTAL | | | | | | |
| SIGN & DATE TO APPROVE | | | | TOTAL HOURS | | |
| EMPLOYEE: | __ / __ / __ | | | REGULAR HOURS | | |
| MANAGER: | __ / __ / __ | | | OVERTIME HOURS (for hourly employees) | | |

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Employee Name: _____

INSTRUCTIONS

1. No employee should begin work without first completing state and federal withholding certificates (W-4 forms).
2. All administrative staff must record in and out times and leave time used.
3. Enter only the hours actually worked each day in the "HOURS WORKED" column. When calculating hours worked, round times to the nearest quarter hour.
4. When entering other paid hours make sure to fill out the "CODE" column, i.e. vacation hours, sick leave hours, personal day, holiday, etc. If absent without pay, enter a "0" in the hours column and indicate the type of unpaid leave in the CODE column.
5. Do not enter anything in the "OT HOURS" column. The payroll department will compute overtime and complete this column.
6. Time sheets must be signed by the employee and the department head.
7. Make sure to make a copy and retain copies for department and employee before submission to payroll.
8. Regular payroll is paid bi-weekly according to the timeline provided at the beginning of each fiscal year.

DEPARTMENT CODES

| | |
|-----------------|--------------------------|
| 1220 Supervisor | 3620 Code Enforcement |
| 1310 Finance | 6990 Grants |
| 1355 Assessment | 7150 Lifeguards |
| 1410 Town Clerk | B8010 Zoning Enforcement |
| 1430 Personnel | B8020 Planning Board |
| 3610 BAR | |

OTHER HOURS CODES

- | | |
|---|--------------------|
| B. Bereavement leave (indicate relationship of relative). | P. Personal day |
| D. Disability leave. | S. Sick leave. |
| F. Family and medical leave (FMLA). | U. Unpaid absence. |
| H. Holiday observed. | V. Vacation leave. |
| I. Injury on the job. | |
| J. Jury duty (attach documentation). | |
| M. Military leave. | |
| MA. Maternity Leave. | |
| O. Other prescribed absence (attach documentation). | |