**Bi-Weekly Timesheet**

Week Starting:

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Employee Id: Employee Name: Supervisor Name:

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Organization:

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| **Day of the week** | **Client/Project** | **Task** | **Work Details** | **Check-In Time** | **Check-Out Time** | **Break Hours** | **Total Hours** | **Non-Billable Hours** | **Total Work Hours** |
| Sun |  |  |  |  |  |  |  |  |  |
| Mon |  |  |  |  |  |  |  |  |  |
| Tue |  |  |  |  |  |  |  |  |  |
| Wed |  |  |  |  |  |  |  |  |  |
| Thurs |  |  |  |  |  |  |  |  |  |
| Fri |  |  |  |  |  |  |  |  |  |
| Sat |  |  |  |  |  |  |  |  |  |
| Sun |  |  |  |  |  |  |  |  |  |
| Mon |  |  |  |  |  |  |  |  |  |
| Tue |  |  |  |  |  |  |  |  |  |
| Wed |  |  |  |  |  |  |  |  |  |
| Thurs |  |  |  |  |  |  |  |  |  |
| Fri |  |  |  |  |  |  |  |  |  |
| Sat |  |  |  |  |  |  |  |  |  |
| **Weekly Total** | | | | | | **3** |  |  |  |

Comments:

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Employee Signature: Date:

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Supervisor Signature: Date:

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[Try Free Online Timesheet](https://bit.ly/3oumY7H)