



GEOTEMPS INC.

BI-WEEKLY TIME SHEET

REMIT TO: FAX (775) 746-7156 or payroll@geotemps.com

Employee ID # _____
 Print Employee Name _____
 Pay period start date (Sunday) _____
 Pay period end date (Saturday) _____

 (Print Client Name)

 (Print Client Supervisor Name)
 Assignment Status: Continuing Final

PLEASE USE INK AND PRESS HARD, AS THERE ARE 3 CARBONS ON THIS FORM.

Date	Regular Hours	Overtime Hours	Project/Location Company Coding
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Total Week 1			
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Total Week 2			
Total Week 1 & Week 2			

Enter time to nearest quarter hour
 15 min = .25 hr
 30 min = .50 hr
 45 min = .75 hr

- Attention Employees:
- It is your responsibility to ensure that your time sheet is received by Geotemps, in accordance with published deadlines.
 - Overtime is paid to "non-exempt" hourly employees for any hours over 40 unless specified by client and/or state laws.
 - Salary and Fee Basis Employees should place actual hours worked in the Regular Hours column.
 - If faxing time sheet to Geotemps, fax the White Copy only.
 - **Forging/Falsifying a Time sheet is grounds for immediate termination and may result in criminal prosecution.**

To receive your paycheck on time, this time sheet must be received by Geotemps, Inc. no later than Sunday at 8PM after the pay period end date.

Comments: _____

Employee Signature _____ Date _____
 I certify that the days shown on this time sheet are true and correct, and that I have worked these hours for the client noted.

Supervisor Signature _____ Date _____
 The above signature constitutes full acceptance of all information on this form.

Supervisor – Please write in words total regular hours and total overtime hours: _____

Geotemps, Inc Office Use Only - Split Assignments					
Assign #:		Assign #:		Assign #:	
Reg:	OT:	Reg:	OT:	Reg:	OT: