



## BI-WEEKLY TIME SHEET

REMIT TO: (775) 746-7156 Fax OR payroll@geotemps.com

Employee Name: \_\_\_\_\_  
 Geotemps ID Number: \_\_\_\_\_  
 Client ID Number: \_\_\_\_\_  
 Pay Period Start Date: (SUN) \_\_\_\_\_  
 Pay period End Date: (SAT) \_\_\_\_\_

Client Company Assigned To: \_\_\_\_\_  
 Department: \_\_\_\_\_  
 Site Supervisor Name: \_\_\_\_\_  
 Site Supervisor Phone: \_\_\_\_\_  
 Assignment Status:  Continuing  Final \_\_\_\_\_

Date	REG	OT	PTO	HOL	PROJECT DESCRIPTION
Sun					
Mon					
Tues					
Wed					
Thurs					
Fri					
Sat					
<i>Week 1 Totals</i>					
Sun					
Mon					
Tues					
Wed					
Thurs					
Fri					
Sat					
<i>Week 2 Totals</i>					
<b>Pay Period Totals (Week 1 + Week 2)</b>					

ENTER TIME TO THE NEAREST  
 QUARTER HOUR  
 15 MIN = .25 HRS  
 30 MIN = .50 HRS  
 45 MIN = .75 HRS

**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 IN A PAY WEEK UNLESS SPECIFIED BY CLIENT AND/OR STATE LAW.
- ✓ SALARY AND FEE BASIS EMPLOYEES SHOULD PLACE ACTUAL HOURS WORKED IN THE APPROPRIATE ASSIGNMENT'S "REG" COLUMN.
- ✓ PER ARIZONA STATE LAW EMPLOYEES WILL ACCRUE 1 HR PAID SICK TIME FOR 30 HRS WORKED AS OF 7/1/17
- ✓ FORGING/FALSIFYING A TIME SHEET IS GROUNDS FOR IMMEDIATE TERMINATION AND MAY RESULT IN CRIMINAL PROSECUTION.

Comments: \_\_\_\_\_

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

I certify that the days and hours shown on this time sheet are true and correct, and that I worked them for the assignment(s) noted.

Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

The above signature constitutes full acceptance of all information on this form

Supervisor – Please write in words the total regular hours, overtime, and earned paid sick time hours:

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