

Potomac Community Resources, Inc.

9200 Kentsdale Drive
 Potomac, MD 20854
 (301)365-0561
 (301)365-3104 (FAX)

Employee Timesheet

Name: _____

Address: _____

Pay Date: _____
For Office Use Only

| Date of Service | Program | Time In | Time Out | # of Hours Worked | Rate per Hour | TOTAL |
|--------------------------|---------|---------|----------|-------------------|---------------|-------|
| | | | | | \$ | \$ |
| | | | | | \$ | \$ |
| | | | | | \$ | \$ |
| | | | | | \$ | \$ |
| | | | | | \$ | \$ |
| | | | | | \$ | \$ |
| | | | | | \$ | \$ |
| Total to be Paid: | | | | | | \$ |

Employee Signature: _____

Date: _____

For Office Use Only:

Approved by: _____

Date: _____