

Forest Lake Hockey Association
Employee Time Tracking Worksheet

Name: _____

Location: _____

Week #1

Date	Day	Time IN	Time OUT	# of Hours	Task	✓

Total # of Hours for 1st Week of PP: _____

Tips to be reported for this pay period: _____

By signing this document, I affirm that all time, is accurate and true.

By signing this document, I affirm that all tips recieved have been claimed.

Employee Signature: _____

Forest Lake Hockey Association
Employee Time Tracking Worksheet

Name: _____

Location: _____

Week #2

Date	Day	Time IN	Time OUT	# of Hours	Task	✓

Total # of Hours for 2nd Week of PP: _____

Tips to be reported for this pay period: _____

By signing this document, I affirm that all time, is accurate and true.

By signing this document, I affirm that all tips recieved have been claimed.

Employee Signature: _____

Total # of Hours worked for 2 Week PP: _____

Total \$ of tips reported for 2 Week PP: _____

Manager Approval of Hours/Times Worked: _____