

MONARCH INDEPENDENT LIVING SERVICES

Staff: \_\_\_\_\_

Pay Period: \_\_\_\_\_

Date:	8		9		10		11		12		13		14		15		Total
	In Total	Out	In Total	Out	In Total	Out	In Total	Out	In Total	Out	In Total	Out	In Total	Out	In Total	Out	
Name: _____																	
Name: _____																	
Name: _____																	
Name: _____																	
Name: _____																	
Name: _____																	
Staff Train.																	
Mtgs. Call In																	
TOTAL																	

Please alphabetize and organize names the same on each side of the timesheet. Timesheet due on the 15<sup>th</sup>.

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Director's Signature