THE EMPLOYER GROUP
HR & PAYROLL OUTSOURCING EXPERTS
OPERATE SMARTER

# SEMI-MONTHLY TIME CARD

Employee Name: _____ Pay Period End Date: ____ - ____ - ____

Subscriber: _____ Location: _____

**INSTRUCTIONS:**

1. Enter your start and stop times (to the nearest minute) in the WORK RECORD section. Required for ALL employees.
2. Any time worked that is over 40 hours in one week should be entered in the Overtime column and approved by your supervisor.
3. At the end of the pay period, total the hours worked in each category and enter in the TOTAL FOR THE PAY PERIOD section.
4. Sign your time card and submit to your supervisor for approval.
5. All time will be calculated using the 7-8 minute rule (will be rounded to the nearest ¼ hour).

| | WORK RECORD | | | | DAILY TOTALS | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| Month: | Start | Stop | Start | Stop | Reg Hours | Overtime | Vacation | Sick | Holiday | Misc. |
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| | Reg Hours | Overtime | Vacation | Sick | Holiday | Misc. |
|---|---|---|---|---|---|---|
| **TOTAL FOR THE PAY PERIOD (Add DAILY TOTALS)** | | | | | | |

I hereby certify that these hours are true and correct.

_____ Employee Signature _____ Date _____ Supervisor's Approval _____ Date

**Email or FAX to The Employer Group at 800-319-0516 by 5:00 PM on Monday following the end of the pay period.**