

Employee Name _____ SCWA/STR Name _____
 Supplier _____ SCWA/STR Signature _____
 Purchase Order No. _____
 Task/Work Authorization # _____ Period Starting _____

	Day	Start Time	Initials	Duration of Lunch	End Time	Initials	Hours Worked
Week 1	Monday						
	Tuesday						
	Wednesday						
	Thursday						
	Friday						
	Saturday						
	Sunday						
Week 2	Monday						
	Tuesday						
	Wednesday						
	Thursday						
	Friday						
	Saturday						
	Sunday						
Week 3	Monday						
	Tuesday						
	Wednesday						
	Thursday						
	Friday						
	Saturday						
	Sunday						
Week 4	Monday						
	Tuesday						
	Wednesday						
	Thursday						
	Friday						
	Saturday						
	Sunday						

- All employees shall initial next to their time in and time out daily entries.
- Lunch breaks are unpaid. (**Note: NY state law requires total time worked include a lunch break**)
- This form shall not be utilized as a Supplier timecard for invoicing purposes; the Supplier shall maintain its own official company timecard.
- Supplier shall be reimbursed on a prorated basis to nearest 1/10 of an hour for less than a full hour's work.