

Contact Number: (+1)647-991-7624

EMPLOYEE NAME

Email ID: kb@kbhkyb.com

SUPERVISOR NAME:

Week Commencing:

Total hours	Day of week	PUNCH TIME		Supervisor Sign
	Mon	IN		
		LUNCH		
		OUT		
	Tue	IN		
		LUNCH		
		OUT		
	Wed	IN		
		LUNCH		
		OUT		
	Thu	IN		
		LUNCH		
		OUT		
	Fri	IN		
		LUNCH		
		OUT		
	Sat	IN		
		LUNCH		
		OUT		
	Sun	IN		
		LUNCH		
		OUT		

THANK YOU