Payroll Attendance Entry Worksheet

Company Name:_____ Check Date:_____

Pay Period:

Start Date:_____ End Date:_____

EMPLOYEE INFORMATION

Department #:_____ Employee #:_____ Type: ☐ Hourly ☐ Salary

Name:_____ Pay Frequency: ☐ Weekly ☐ Bi-Weekly ☐ Semi-Monthly ☐ Monthly

	Reg. Hrs.	Ovt. Hrs.	Spec. Hrs.	Holiday Hrs.	Sick Hrs.	Vacation Hrs.	Personal Hrs.
	_____	_____	_____	_____	_____	_____	_____
Temp. Deductions/Earnings: _____	_____	_____	_____	_____	_____	_____	_____

Department #:_____ Employee #:_____ Type: ☐ Hourly ☐ Salary

Name:_____ Pay Frequency: ☐ Weekly ☐ Bi-Weekly ☐ Semi-Monthly ☐ Monthly

	Reg. Hrs.	Ovt. Hrs.	Spec. Hrs.	Holiday Hrs.	Sick Hrs.	Vacation Hrs.	Personal Hrs.
	_____	_____	_____	_____	_____	_____	_____
Temp. Deductions/Earnings: _____	_____	_____	_____	_____	_____	_____	_____

Department #:_____ Employee #:_____ Type: ☐ Hourly ☐ Salary

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Temp. Deductions/Earnings: _____	_____	_____	_____	_____	_____	_____	_____

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	Reg. Hrs.	Ovt. Hrs.	Spec. Hrs.	Holiday Hrs.	Sick Hrs.	Vacation Hrs.	Personal Hrs.
	_____	_____	_____	_____	_____	_____	_____
Temp. Deductions/Earnings: _____	_____	_____	_____	_____	_____	_____	_____

All information is required to initialize payroll properly. If you choose to submit your form(s) as an e-mail attachment, please be aware that since e-mail is not secure, it is possible that another party could intercept your email before we receive it. Therefore, we cannot guarantee confidentiality of your information if sent via e-mail.

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610-310-7615 **PanaceaPayroll.com**