Daily Attendance Log

Mason Security Network

Employee Name _____

Employee # _____

Date _____

Please sign in upon arrival, record time going to and returning from all scheduled breaks, and at the end of the day.

Date M / D / Y	Time In	First Break In / Out	Lunch In / Out	Last Break In / Out	P.T.O.	Holiday	Training	End of Shift	Total Hours
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Employee Signature _____ Date _____

Supervisor _____ Date _____