



# TIMESHEET

Week Ending Sunday: \_\_\_\_\_ Client Name: \_\_\_\_\_

Employee Name: \_\_\_\_\_

|                  | Date | Start Time | Finish Time | Less Breaks | Total Hours |
|------------------|------|------------|-------------|-------------|-------------|
| <b>MONDAY</b>    |      |            |             |             |             |
| <b>TUESDAY</b>   |      |            |             |             |             |
| <b>WEDNESDAY</b> |      |            |             |             |             |
| <b>THURSDAY</b>  |      |            |             |             |             |
| <b>FRIDAY</b>    |      |            |             |             |             |
| <b>SATURDAY</b>  |      |            |             |             |             |
| <b>SUNDAY</b>    |      |            |             |             |             |

**Total Weekly Hours**

Employee Signature: \_\_\_\_\_

**Client Notice**

By signing this, you are verifying the hours worked, that you are satisfied with the work completed and that you accept Allstar Recruitment Groups Terms & Conditions of Business. If you have not been provided with a copy of our Terms & Conditions, please contact our office.

Supervisor Print Name: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_