

Personnel Solutions Plus

Weekly Timesheet

Timesheets must be received by noon on Monday the following week.

Email to: timesheet@personnelsolutionsplus.net

Fax: (813) 890-0261



Week Ending (MM/DD/YYYY)	
Employee Name	
Client Name	
Department	
Site Supervisor	
Site Address	

*	Month/Day	Time-In	Lunch Start	Lunch End	Time-Out	Total
SUN						
MON						
TUE						
WED						
THU						
FRI						
SAT						
Total Hours Worked						

Authorized Client Signature

By my signature above, the hours above were satisfactorily worked by the temporary employee. The client agrees to the terms and conditions set forth.

Employee Signature

By my signature above, I certify that the reported hours are accurate and that during the period specified above, I have not been injured during my work shift(s), nor have I witnessed an accident resulting in injury to someone else.