



1638 Lockhill - Selma
 San Antonio, TX 78213
 Phone (210) 764-8500
 Fax (210) 764-8501

246.05 Time Sheet

Week One	<u>Date</u>	<u>Client</u>	<u>Time In</u>	<u>Time Out</u>	<u>Hours Worked</u>
Saturday	_____	_____	_____	_____	_____
Sunday	_____	_____	_____	_____	_____
Monday	_____	_____	_____	_____	_____
Tuesday	_____	_____	_____	_____	_____
Wednesday	_____	_____	_____	_____	_____
Thursday	_____	_____	_____	_____	_____
Friday	_____	_____	_____	_____	_____
Week Two					
	<u>Date</u>	<u>Client</u>	<u>Time In</u>	<u>Time Out</u>	<u>Hours Worked</u>
Saturday	_____	_____	_____	_____	_____
Sunday	_____	_____	_____	_____	_____
Monday	_____	_____	_____	_____	_____
Tuesday	_____	_____	_____	_____	_____
Wednesday	_____	_____	_____	_____	_____
Thursday	_____	_____	_____	_____	_____
Friday	_____	_____	_____	_____	_____

I certify that the above hours are accurate and true. I also understand that reporting inaccurate information on this time sheet can be a reason for terminating my employment with Caring Companions.

 Employee Name (Print)

 Social Security last 4 digits

 Employee Signature

 Date