

Company Name	Week Ending Sunday
<input type="text"/>	<input type="text"/>
Address <input type="text"/>	City <input type="text"/>
Report to / Supervisor <input type="text"/>	Job Order Number <input type="text"/>
Job title / Department <input type="text"/>	Hold my check? <input type="checkbox"/> Yes, hold my check <input type="checkbox"/> No, mail or deliver
Employee Name <input type="text"/>	Available for work? <input type="checkbox"/> Yes, I am available <input type="checkbox"/> No, I am unavailable
Employee Signature X _____	When available? <input type="text"/>

Day	Date	HOURS TO NEAREST QUARTER HOUR				
		Started	Finished	Less Lunch	Reg Hours	OT Hours
Mon						
Tues						
Wed						
Thurs						
Fri						
Sat						
Sun						

<p>▶ FOUR (4) HOUR MINIMUM PER ASSIGNMENT ◀</p> <p>Client Phone Number _____</p> <p>Client Name _____</p> <p>Authorized Signature (Client) X _____</p>	Regular		Overtime	
	HRS	MIN	HRS	MIN
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Total Hours to the nearest quarter		HRS	MIN
		<input type="text"/>	<input type="text"/>	