



Employee Name:	Client:
Position Title:	Week Ending:

1. All hours must be recorded in quarterly increments (15 minutes = .25, 30 minutes = .5, and 45 minutes = .75).
2. Concero Resources' workweek is Sunday through Saturday.
3. Only actual time worked should be entered. Vacation, Holidays, etc should not be recorded.
4. All breaks must be deducted from time worked.

Day of Week	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total Hours Worked
Hours Worked								

By signing below, I certify that (a) the hours entered above were actually worked by me during the week noted; (b) all hours were authorized by my supervisor; and (c) I have notified my supervisor and Concero Resources in writing of accidents, injuries, or incidents that occurred during the week noted.	By signing below, I certify that (a) I am authorized to provide this certification; (b) the contractor satisfactorily performed the agreed upon services; and (c) all hours entered above, including overtime, were actually worked.
Contractor's Signature	Authorized Client Signature

Timesheet must be faxed to 901-531-8192 by 9:00 a.m. (CST) each Monday

Please retain a fax confirmation for your records. Late, incomplete, or illegible timesheets will not be processed.