



IMPORTANT INFORMATION ABOUT COMPLETING THIS TIMESHEET

1. PRINT NEATLY WITHIN BOXES. DO NOT INCLUDE EXTRA PUNCTUATION.
2. FAX THIS TIMESHEET TO 877-717-5797 BY SUNDAY MIDNIGHT FOR PROMPT PYMNT.
3. ROUND ALL RECORDED TIME TO THE NEAREST QUARTER HOUR (.00; .25; .50; .75) ONLY.
4. PAYROLL HELPLINE: 877-719-1400

V 4.04

HOSPITAL INFORMATION		On Assignment EMPLOYEE							
Hospital Name (including city and state)		Last Name		First Name					
				Week-Ending Date					
				<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>					

USE 24 HOUR (MILITARY) TIME. *Do Not Include On Call - Not Worked or On Call - Worked (Called In) in the Total Hours. See CALL TIME SECTION Below.

DAY	Dates		Time In		Lunch		Time Out		Total Hours Worked*		Cost Center or Unit	Do Not Write in This Space
	Mnth	Day	Hour	Minutes	Hour	Minutes	Hour	Minutes	Hour	Minutes		
Sat				:		:		:		:		
Sun				:		:		:		:		
Mon				:		:		:		:		
Tue				:		:		:		:		
Wed				:		:		:		:		
Thur				:		:		:		:		
Fri				:		:		:		:		
TOTALS					

ON CALL HOURS WORKED											On Call not Worked		Do Not Write In This Space	
DAY	Dates		Time In		Lunch		Time Out		Total Call Hours*		Total			
	Mnth	Day	Hour	Minutes	Hour	Minutes	Hour	Minutes	Hour	Minutes	Hour	Minutes		
Sat				:		:		:		:		:		
Sun				:		:		:		:		:		
Mon				:		:		:		:		:		
Tue				:		:		:		:		:		
Wed				:		:		:		:		:		
Thur				:		:		:		:		:		
Fri				:		:		:		:		:		
TOTALS			

HOSPITAL AUTHORIZATION The total number of hours worked is correct Hospital Authorized Signature _____ Date _____	ALTERNATE MAILING INFORMATION <i>If no address is provided, check will be sent to the address on file.</i> Send Check or Stub To: <input type="checkbox"/> Fed Ex (15.00 fee)	EMPLOYEE TIMESHEET CERTIFICATION Employee Signature** _____ Date _____ **My signature above acknowledges that the time I have entered above is correct and accurate, and I have not been coerced or encouraged in any manner to enter inaccurate hours. During this workweek, I have taken all the unpaid breaks to which I was entitled and have taken all unpaid meal periods or signed waivers for all on duty meal periods.
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