

clearpoint weekly timesheet



5204 Jackson Street
Houston, Texas 77004

www.clearpointco.com

Name of Employee:	
Client Company:	
Supervisor's Name:	
Phone # with ext.	

Please fax completed time sheet to 713-779-5520 by **11:00am each Monday.**

Week Beginning Date (Saturday) _____

Day	Date	Time In	Time Out	Lunch/ Breaks	Daily Job Description	Total Hours
Saturday						
Sunday						
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Regular Hours						
Approved OT Hours						
Total Hours						

Each employee shall complete a standard time report weekly and submit it to CLIENT for confirmation of hours worked. Confirmation entails the signature of the employee's supervisor. Upon signing the time report, the supervisor is in full agreement with the amount of hours worked. A signed time report shows a contractual obligation to pay CLEARPOINT for services rendered. CLEARPOINT does allow a one-week grace period for any concerns regarding the supplied services. After the one-week period the CLIENT is obligated to pay all invoices net 30 days. A copy of each confirmed time report shall be supplied to CLIENT with the billing.

Employee Signature Date

Authorized Supervisor Signature Date