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			(Please print) (First)					(Last)		
Client:			Location:							
Time Sheet For the Week Starting FROM					то					
			DATE					_		
LINE	<b>Project Description</b>		Code	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
1										
2										
3										
4										
5										
6		TOTAL BILLABLE HOURS ONLY(Lines 1-5):								
7			Sick							
			Leave							
8			Paid							
			Vacation							
9			Holiday							
10			Other							
			TOTAL DA	VARIEI	IOUDS //	in a a G 44\				
			TOTAL PA	TABLE I	IOURS (LI	nes 6-11)				
<b>5</b>		D-1-			Di N					
Employee's Sig	gnature:	_ Date: _			Phone No	umber:				
Supervisor Signature:			Date:							
DDOCEDURE.	#Dlagga uga nama sa	on Coolel C	Couries Cond	only.						
PROCEDURE:	#Please use name as # Please get project m				t GIT's and	l client pro	iect			
	" I Todoc got project III	iai iagoi o oig	nature orny n	you are a		i ononi pio	joot			

Employee's Name:

Please fax your time sheet every Monday, only to the timesheet Fax # 281-605-5969 or email to time@genuineitllc.com

# Please ensure that the billable hours on the GIT time sheet matches the billable hours on client's timesheet.

# Please send time sheets on a weekly basis every Monday for the previous week.

# Please total all daily and weekly billable hours # Please use one time sheet for each client.

Any discrepancy will result in delay in your payroll.

Email: Info@GenuinelTllc.com,Ph# 713-230-8558 Fax: 281-605-5969

Website: www.GenuineITLLC.com