

TIME SHEET

WEEK OF:

ADVANTAGE HCS

WORK IS HECTIC GETTING HELP DOESN'T HAVE TO BE
 P.O. BOX 80126 Midland, TX 79708 Fax (432)242-3805 Phone (432)466-1994

EMPLOYEE NAME:	TITLE:
FACILITY NAME: ADVANTAGE HCS	AREA WORKED:
CHARGE NURSE: ___YES ___NO LUNCH: ___YES ___NO	SPECIAL UNIT: ___OB&L&D __ER __NICU __OTHER _____

	DATE	START TIME	END TIME	START TIME	END TIME	REGULAR HOURS	OVERTIME HOURS	TOTAL HOURS
Sunday								
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
WEEKLY TOTALS								

MILEAGE _____

EMPLOYEE SIGNATURE:	DATE:
SUPERVISOR SIGNATURE:	DATE:
CLIENT SIGNATURE:	DATE:

1. Get the Timesheet **signed** at the end of each shift.
2. Snap a picture of the signed timesheet.
3. Email Immediately to Timesheet@advantage-hcs.com.