

WEEK ENDING

Saturday,



WEEKLY TIMESHEET

<u>Temporary employees</u>: Please email your completed timesheet to <u>timesheet@quantum.ca</u>. <u>Incorporated contractors</u>: Please email your completed timesheet to <u>sub.contractors@quantum.ca</u>.

Timesheets must be submitted by MONDAY 12 P.M. • Please retain the original time sheet for your records. **EMPLOYEE CODE EMPLOYEE NAME CLIENT NAME**

DAY	DATE YYYY-MM-DD	TIME IN HH:MM	TIME OUT HH:MM	TOTAL HOURS		HOURS WORKED
Sunday						
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
					Regular Hours	
INSERT O.T. HOURS, IF ANY						
					Total Hours	
	Initials					

	\mathbf{R} (9913	NT	US		ML	4
ГУ		7514		UJ	ЕС	יואנ	•

The undersigned is an authorized representative of the CLIENT indicated above (the "Client"). The electronic confirmation certifies that the employee whose name appears above (referred to as the "assigned Employee") worked the hours on the dates as indicated above (with services performed satisfactorily). The authorized representative also expressly acknowledges and accepts the terms and conditions of Quantum's Service Agreement as outlined on Quantum's website (www.quantum.ca).				
Date	Electronic Confirmation	Please Print Authorized Name		