



# CONTRACTOR TIME SHEET

Client: \_\_\_\_\_ Week Ending: \_\_\_\_\_  
 (Saturday's Date)

Employee Name: \_\_\_\_\_

Employee ID Number: \_\_\_\_\_

Supervisor: \_\_\_\_\_

**Billable Hours**

Task Description	Sun.	Mon.	Tue.	Wed.	Thu.	Fri.	Sat.	Total
Date	/	/	/	/	/	/	/	
<b>WEEKLY TOTALS:</b>								

**\*Hours must be broken into 15 minute increments.**

**Example 8 hours 34 minutes would be 8.50 hours**

**Example 8 hours 14 minutes would be 8.0 hours**

Any questions about hours contact your TITAN Representative.

**Non-Billable Hours – Must verify eligibility with a TITAN Representative**

	Sun.	Mon.	Tue.	Wed.	Thu.	Fri.	Sat.	Total
PTO (Personal Time Off)								
Holiday								
<b>WEEKLY TOTALS:</b>								

**Comments:**

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Timesheets must be faxed to 412-291-1189 by 9:00a.m. on Monday for the prior week's activity.**