

WEEKLY TIME REPORT

NAME: _____

WEEK ENDING: _____

PAGE # 1 OF 3

TUESDAY - DAY #1

DATE: _____

Customer	Store Number	Ticket/Job Number	Invoice Number	Tech(s)

EM	OOT	MA

TT	IN	OUT	TT

ST TRAVEL	ST	1-1/2

Time off Code

WEDNESDAY - DAY #2

DATE: _____

Customer	Store Number	Ticket/Job Number	Invoice Number	Tech(s)

EM	OOT	MA

TT	IN	OUT	TT

ST TRAVEL	ST	1-1/2

Time off Code

THURSDAY - DAY #3

DATE: _____

Customer	Store Number	Ticket/Job Number	Invoice Number	Tech(s)

EM	OOT	MA

TT	IN	OUT	TT

ST TRAVEL	ST	1-1/2

Time off Code

FRIDAY - DAY #4

DATE: _____

Customer	Store Number	Ticket/Job Number	Invoice Number	Tech(s)

EM	OOT	MA

TT	IN	OUT	TT

ST TRAVEL	ST	1-1/2

Time off Code

Special hours Codes: EM=Emergency Call OOT=Out-of-Town MA=Manager Approval (put Manager's initials)

Note: Employees must ensure the office is aware of any special timesheet rules that were given by upper management. If the office isn't aware, your special rules won't be applied.

Time off Codes: PTO=Paid Time Off/Personal Day H= Holiday F= Funeral (prior approval) J=Jury Duty(Unpaid) U=Unpaid Time off

Note: Employees must ensure they have enough Paid Time off when documenting Paid Time off. Any errors or overages will be corrected in future payroll runs.

******You must take a 1/2 hour lunch a day. If you do not deduct your 1/2 hour lunch from your time, the office will.**

GPS is monitored and times will be adjusted accordingly.

WEEKLY TIME REPORT

NAME: _____

WEEK ENDING: _____

SATURDAY - DAY #5

DATE: _____

Customer	Store Number	Ticket/Job Number	Invoice Number	Tech(s)

EM OOT MA

TT	IN	OUT	TT

ST TRAVEL	ST	1-1/2

Time off Code

SUNDAY - DAY #6

DATE: _____

Customer	Store Number	Ticket/Job Number	Invoice Number	Tech(s)

EM OOT MA

TT	IN	OUT	TT

ST TRAVEL	ST	1-1/2

Time off Code

MONDAY - DAY #7

DATE: _____

Customer	Store Number	Ticket/Job Number	Invoice Number	Tech(s)

EM OOT MA

TT	IN	OUT	TT

ST TRAVEL	ST	1-1/2

Time off Code

Special hours Codes: EM=Emergency Call OOT=Out-of-Town MA=Manager Approval (put Manager's initials)

Note: Employees must ensure the office is aware of any special timesheet rules that were given by upper management. If the office isn't aware, your special rules won't be applied.

Time off Codes: PTO=PTO/Personal Day H= Holiday F= Funeral(prior approval) J=Jury Duty(Unpaid) U=Unpaid Time off

Note: Employees must ensure they have enough Paid Time off when documenting Paid Time off. Any errors or overages will be corrected in future payroll runs.

****You must take a 1/2 hour lunch a day. If you do not deduct your 1/2 hour lunch from your time, the office will.

GPS is monitored and times will be adjusted accordingly.

TOTAL ST TVL	TOTAL ST	TOTAL 1-1/2

EXPENSE REPORT

NAME: _____ WEEK ENDING: _____

PETTY CASH EXPENSE

Date	Purchased From	Description	Customer Number	Ticket/Job Number	Service Inv. Number	Approved By	Approval Date	Amount
Total								

STAPLE
RECEIPTS
ON
REVERSE
SIDE

FUEL PETTY CASH EXPENSE

Date	Purchased From	Description	Vehicle #	Mileage	Product	Price/Gal	Number of Gallons	Cash Amount
		Fuel						
		Fuel						
		Fuel						
		Fuel						
		Fuel						
		Fuel						
Fuel Total								

STAPLE
RECEIPTS
ON
REVERSE
SIDE

VEHICLE MAINTENANCE PETTY CASH EXPENSE

Date	Purchased From	Description	Vehicle #	Mileage	Approved By	Approval Date	Amount
Veh Main Total							

STAPLE
RECEIPTS
ON
REVERSE
SIDE

Time off Codes: PTO=Paid Time Off/Personal Day H= Holiday F= Funeral (prior approval) J=Jury Duty(Unpaid) U=Unpaid Time off

Note: A receipt is required to receive reimbursment for all expenses.

TOTAL PETTY CASH

Dispatcher / Manager must approve all petty cash amounts greater than \$25.00 in advance.