



2024 Arkansas Valley Dr, Suite 603  
Little Rock, AR 72212  
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## Weekly Employee Time Sheet

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

**Assignment Location :** \_\_\_\_\_

Day	Date	Start	Finish	Lunch	Total Hours
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
<b>Total Hours:</b>					

**Employee Signature:** \_\_\_\_\_

**Supervisor Signature:** \_\_\_\_\_

**On Tuesdays either:**

**\*Fax to #501-663-1523**

**\*Email to [smartstaffcorp@outlook.com](mailto:smartstaffcorp@outlook.com)**