

Company _____ Project _____ PO # (if known) _____

Employee Name	Daily Date:									Total	Foreman Signature
	In										
	Lunch										
	Out										
	Total										
Employee Name	Daily Date:									Total	Foreman Signature
	In										
	Lunch										
	Out										
	Total										
Employee Name	Daily Date:									Total	Foreman Signature
	In										
	Lunch										
	Out										
	Total										
Employee Name	Daily Date:									Total	Foreman Signature
	In										
	Lunch										
	Out										
	Total										
Employee Name	Daily Date:									Total	Foreman Signature
	In										
	Lunch										
	Out										
	Total										
Employee Name	Daily Date:									Total	Foreman Signature
	In										
	Lunch										
	Out										
	Total										

**Must be emailed to
timecard@staffccs.com or Text a
picture to (704) 286-9508 by
Monday at 11:00 am**

