EMPLOYEE TIME RECORD

EMPLOYEE NAME		PROPERTY #	NAME OF PROPERTY
ADDRESS		**PAYROLL PERIOD**	
CITY / STATE / ZIP		FROM:	TO:

DATE	HOURS WORKED	WORK PERFORMED	PR PROCESSOR USE ONLY

X $ **=** $

TOTAL HOURS   HOURLY RATE

I certify that the hours recorded on this record are complete and correct for the period indicated.

Employee's Signature   Manager's Approval (Signature)   Property Manager Approval (Signature)

Date _____   Date _____   Date _____

EMPLOYEETIMESHEET (4-25-07)

FAX TO 503-555-1212