

# MONTHLY TIMESHEET

CORE



phone : 212 885 2197 fax : 212 580 9238

Employee/Consultant: .....

Client: ..... Month Of: .....

\*Please include only days worked for this month.

	DATES	# Of Work Days
Week 1:		
Week 2:		
Week 3:		
Week 4:		
Week 5: (if any)		

Total Days for the Month: .....

Consultant's Signature: .....

Supervisor Name: .....

Date: .....

Manager's Signature: .....

COMMENTS: .....

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