

INDEFREE TIMESHEET

Employee Name (print): _____

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| <input type="checkbox"/> Corona | <input type="checkbox"/> Murrieta |
|---------------------------------|-----------------------------------|

Position: _____ Officer: ___yes ___no

Check box if you have any change of personal information, and make the changes here:

| Date | Time In | Time Out | Time In | Time Out | Total hours | Mileage | Signature (required) ¹ |
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| <i>Totals</i> | | | | | | | |

¹Prior authorization and signature is required for any hours worked outside of typical work schedule.
²Please sign your timesheet (after carefully checking for accuracy) and fax to (951) 253-4760.

²Employee Signature _____ Date faxed _____

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| <p>(For office use only)</p> <p>- Corrections made: ___ None ___ Hours ___ Work day</p> <p>Authorized by: _____</p> <p>- Description of any future changes (besides what may be noted above):</p> <p>Effective Date:</p> <p>Authorized by: _____</p> | <p>BONUSES EARNED</p> <p>Amount \$ _____</p> <p style="text-align: right;">Describe:</p> <p>___ Referral</p> <p>___ Laser</p> <p>___ Performance</p> <p>___ Other:</p> <p>Authorized by: _____</p> |
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