



MELINDA  
HOLM+  
ASSOCIATES  
EXPERIENCE TALENT

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**Weekly Time Sheet**

**Please fax the completed and signed form to 312.654.9392.**

Employee Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Date: \_\_\_\_\_

Company Name: \_\_\_\_\_ For the Week of: \_\_\_\_\_

|       | Mon | Tues | Wed | Thurs | Fri | Sat | Sun |
|-------|-----|------|-----|-------|-----|-----|-----|
| In    |     |      |     |       |     |     |     |
| Lunch |     |      |     |       |     |     |     |
| Out   |     |      |     |       |     |     |     |
| Total |     |      |     |       |     |     |     |

Total Hours for Week: \_\_\_\_\_

Freelancer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Client/Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- Please contact your MHA Recruiter before working overtime.
- Please make sure that your timesheet is **signed** by the client before faxing it back to MHA.
- If you have any questions, please call us at 312.654.9391 or email us at [info@mhajobs.com](mailto:info@mhajobs.com).

Thank you for working with MHA and have a great day!