AMERICAN PROTECTION TIME SHEET

EMPLOYEE NAME_____

FAX (818) 392-8022

DATE	LOCATION	LUNCH		LUNCH		10 minute	TOTAL
DAY		Shift Start	OUT	IN	Shift end	paid rest break	HOURS
					TOTAL HOURS		

NOTE: **You are responsible for your timesheet. No willful discrepancy on your timesheet will be tolerated.**

Please complete your timesheet daily to avoid mistakes. APSS requires every employee to take a 10 minute every paid rest break four working hours. The rest period must be not later than the end of the third hour of the shift. A non paid 30 minute Lunch break is mandatory . It is required that the 30 minute meal period be taken between the second and fifth working hour. It is your responsibility to follow the above stated regulations.

YOU MUST RETURN YOUR TIMESHEET TO APSS INC. ON THE 1 ST AND 16 TH OF EACH MONTH BEFORE 9:00AM

YOUR CHECKS WILL BE READY ON THE 7th AND THE 22nd OF EVERY MONTH.

_____ Officer's Signature

_____ Officer Name

_____ Supervisor's Signature

PAID_____/_____/_____