



# EXECUTIVE ASSISTANCE INC.

# TIMESHEET

25 Adelaide St. E.  
Suite 1711  
Toronto, Ontario  
M5C 1Y7  
Phone: (416) 368-8700  
Fax: (416) 368-0555

PLEASE COMPLETE IN DETAIL

EMPLOYEE NAME: \_\_\_\_\_

S.I.N. \_\_\_\_\_

WEEK ENDING \_\_\_\_\_

DATE	A.M. START	LUNCH START	LUNCH FINISH	P.M. FINISH	TOTAL DAILY HOURS
				TOTAL HOURS	

TIMESHEETS MUST BE FAXED TO US NO LATER THAN 7:00PM FRIDAYS

PLEASE CHECK: Mail  Pick-Up  Assignment Completed  Assignment Continuing

COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

AUTHORIZED COMPANY SIGNATURE \_\_\_\_\_

Please be advised that if a temporary employee is hired on a full-time basis by your company, a referral fee will apply unless otherwise stated by your consultant.