



Phone: 281-479-4277
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DAILY PROJECT TIMESHEET

Customer: Project Title: Job Number: Day Shift
Location: Contact Name: Date: Night Shift

LABOR						EQUIPMENT			MATERIALS		
EMPLOYEE NAME	TRADE	PER DIEM	START TIME	END TIME	TOTAL HRS	EQUIPMENT ITEM	No. UNITS	DAILY / Per Shift	EQUIPMENT ITEM	No. UNITS	SHIFT HRS
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
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20											
21											
22											
23											
24											
25											

JOB ITEMS QUANTITY DELAY OR STAND-BY

PER DIEM:

PPE:

TRAVEL MILES:

IPS Representative _____ Date _____ Client Representative _____ Date _____