

# FIVE STAR SECURITY DAILY TIMESHEET

DATE: \_\_\_\_\_

PROJECT NUMBER: \_\_\_\_\_ PROJECT CONTRACTOR: \_\_\_\_\_

PROJECT LOCATION: \_\_\_\_\_

START TIME \_\_\_\_\_ END TIME \_\_\_\_\_ # OF HOURS WORKED \_\_\_\_\_

INSPECTOR/CONTRACTOR SIGNATURE \_\_\_\_\_

OFFICER \_\_\_\_\_ AGENCY \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

OFFICER'S SIGNATURE \_\_\_\_\_

Completed Timesheets should be faxed to 205-663-4916 or emailed to [payroll@5-starsecurity.com](mailto:payroll@5-starsecurity.com) for processing. All first time LEO contractors must include a W-9 form with Timesheet. Checks will be mailed directly to the individual officer's address.

Office use only below this line.

Project # \_\_\_\_\_

\_\_\_\_\_

Work order # \_\_\_\_\_

\_\_\_\_\_