

PHONE 404-806-7722		Acrobat Outsourcing		FAX 404-806-7601	
PROOF OF PERFORMANCE & TIME SHEET					
CLIENT NAME	D'Anthony Elliott	DATE	11/12-11/18/8		
DEPARTMENT	Engineering Department	DAY		Good E. Excellent	
REPORT TO	Mr. Conrad / Michael	TIME		NI - Need Improvement	
NAME	SIGNATURE	IN	OUT	BREAK	TOTAL HRS
D'Anthony Elliott	<i>D'Anthony Elliott</i>	8:00	6:30	30	10
D'Anthony Elliott	<i>D'Anthony Elliott</i>	8:00	6:30	30	10
D'Anthony Elliott	<i>D'Anthony Elliott</i>	8:00	6:00	30	9.5
D'Anthony Elliott	<i>D'Anthony Elliott</i>	8:00	5:30	30	9
D'Anthony Elliott	<i>D'Anthony Elliott</i>	8:00	4:30	30	8
46.5 hrs					
Call 404-472-8684					
I have to					
confirm hours					
TO BE COMPLETED BY CLIENT					
I certify that the server(s) successfully completed the amount of time stated above and is entitled to full pay for the services rendered to us					
COMMENTS					
SIGNATURE		NAME		TITLE	
				DATE	

The W midtown.