261948

PHONE
404-806-7722

Acrobat Outsourcing

FAX
404-806-7601

PROOF OF PERFORMANCE & TIME SHEET

CLIENT NAME: N/A
DEPARTMENT:
REPORT TO:
DATE: 1-10-19
DAY: Thursday
TIME: 6

G: Good E: Excellent
NI: Need Improvement
R / NR: Repeat / No Repeat

	NAME	SIGNATURE	IN	OUT	BREAK	TOTAL HR	PROMPTNESS	APPEARANCE	PERFORMANCE	ATTITUDE	R / NR
	Tyrone Butler		6:00	6:15	30	11.75					
61948	Myleshia Cooper		6:10	6:00pm	30	11.33		SERVER			
261948	Keith Booker		7:00	1:30	No break	6.5					
261948	Greyson Williams		2:30	7:00	30	4.5					
	Pamela Madison		2:30	6:30	30	4					
261948	Tijuana Boggans		2:30pm	7:00pm	30	4.5		BARTENDER			
61948	Rodney Mitchell		2:30p	7:00p	—	4.5		II			
61948	Aaron Vance		8:15	3:00	30	6.25					
	Colby Stubblefield		2:30	7:00	—	4.5		BARTENDER			
	Larissa Mathis		6:35	3:30	30	8.42					
61948	Roseann Jones		6:30	3:30	30	8.5					
	DORIS WYNN		3:00	6:30	—	3.5		BARTENDER			

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
		GM	1/10/19