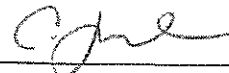


265069

Support Staff Individual Sign In Sheet for Acrobat (Drake) Staffing ONLY

Team Member Name Printed: CEORIC FORD

Team Member Signature: 

Team Member Position: SUPERVISOR

Day	Date	Time In	Break Out	Break Return	Time Out		Team Member Initial
Monday			30 Minutes				
Tuesday	1/22	9:00am	30 Minutes	N/A	4pm	7	CF
Wednesday	1/23	9am	30 Minutes	N/A	4pm	7	CF
Thursday	1/24	9am	30 Minutes	N/A	3:30pm	6.5	CF
Friday	1/25	9am	30 Minutes	N/A	5:00pm	8	CF
Saturday			30 Minutes				
Sunday			30 Minutes				
*** DO NOT FILL IN TOTAL HOURS DAILY OR TOTAL HOURS FOR THE WEEK***						28.50	

Requisition Number: _____

Manager Print Name: _____

Manager Sign Name: _____