



Admiral Security Services, Inc.



Department	Billing Dept.
Document	Timesheet
Contact	Billing@AdmiralSS.com / Fax: 925-421-0843

Client:	Start Date:	End Date:	
Location Name:			
Address:	City:	State:	Zip:

Security Officer: Fill out below accurately and legibly – Obtain manager signature

Print Name	Date	Time In	Lunch Out	Lunch In	Time Out	Approved By	Officer Signature	Total Hrs.
TOTAL HOURS:								

NOTE: Security Officers and Police Officers are expected to work in full uniform and be prepared to assume their duties at their scheduled starting time. The "Time In" will show the actual start time, unless you are late or were requested by a supervisor to start earlier. The "Time Out" column will show the actual time you went off duty, and or the actual time you were relieved of duty. REMEMBER a Security Officer NEVER leaves His/Her post unmanned unless you are instructed to do so by a member of the Management team.

MANAGER SIGNATURE _____ STORE STAMP _____