

# Clean Air Testing Labs, Inc.

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## INDIVIDUAL EMPLOYEE / WEEKLY TIME RECORD

Name:			Week Beginning:				
Date:	Project #	Project Address	Time In	Time Out	Lab Dropoff	Total Hours	Expenses
Grand Total for Week of: <u>  /  /  </u> : <u>      </u> <b>Total Hours</b>			Comments:				
Signature:							