



101 Nickerson St. STE 200, Seattle, WA 98109  
 Phone: 877-689-0100 or 800-733-6877

**Per Diem Healthcare Staffing Time Sheet**

FAX or E-MAIL TO:  
**FAX: 1-888-633-2285**  
[timesheet@chealthcare.com](mailto:timesheet@chealthcare.com)  
 or  
[timesheet@qshift.com](mailto:timesheet@qshift.com)  
*Send after last shift of the week,  
 no later than 9am Monday Morning*

Week Ending: \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_

Sunday Day Shift thru Saturday Night Shift

Supervisor Signature: \_\_\_\_\_

Date Worked	Shift Start and End Times				Lunch If none taken Supervisors Initials		Total Hours	Facility Name		Supervisors Initials
	Circle Shift Time		Write In Time					Unit/Floor	Other	
	Start	End	Start	End						
<b>Sunday</b>	0600	1430			YES	NO				
	0700	1530								
	1400	2230								
	1500	2330								
	2300	0730								
<b>Monday</b>	0600	1430			YES	NO				
	0700	1530								
	1400	2230								
	1500	2330								
	2300	0730								
<b>Tuesday</b>	0600	1430			YES	NO				
	0700	1530								
	1400	2230								
	1500	2330								
	2300	0730								
<b>Wednesday</b>	0600	1430			YES	NO				
	0700	1530								
	1400	2230								
	1500	2330								
	2300	0730								
<b>Thursday</b>	0600	1430			YES	NO				
	0700	1530								
	1400	2230								
	1500	2330								
	2300	0730								
<b>Friday</b>	0600	1430			YES	NO				
	0700	1530								
	1400	2230								
	1500	2330								
	2300	0730								
<b>Saturday</b>	0600	1430			YES	NO				
	0700	1530								
	1400	2230								
	1500	2330								
	2300	0730								