

Worker Name: _____

Veteran Name: _____

Authorized Representative Name: _____

Pay Period Begins: (MM/DD/YYYY) ____ / ____ / ____ Pay Period Ends: (MM/DD/YYYY) ____ / ____ / ____

Day of Week	Service Date (MM/DD)	Time-In	Time-Out	Total Hours Worked
Sun	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Mon	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Tue	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Wed	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Thu	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Fri	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Sat	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Sun	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Mon	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Tue	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Wed	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Thu	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Fri	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Sat	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Sun	/	: <input type="radio"/> AM <input type="radio"/> PM	: <input type="radio"/> AM <input type="radio"/> PM	
Service Hours Total:				

The Employer and Worker certify that the information provided on this timesheet is a true and accurate statement of the services provided. The Employer and Worker understand that payment for services provided are subject to payroll taxes.

Worker Signature: _____ Date: ____ / ____ / ____

Veteran/AR Signature: _____ Date: ____ / ____ / ____

Timesheet Submission

Mail

10425 W North Ave
Suite 345
Milwaukee, WI 53226

Email

PayrollTimesheets@Premier-FMS.com

Fax

855.325.4668

Timesheet Checklist

Is my legal name on the TS?

Is my Veteran's legal name on the TS?

Did I fill-in the correct pay period with the correct start and end dates?

Example (See schedule for dates):

Pay Period Begins: (MM/DD/YYYY) Pay Period Ends: /DD/YYYY)

07 / 05 / 2024 07 / 18 / 2024

Did I fill-in the dates for the correct day of the week?

Example: July 9th is a Sunday - you would fill the first Sunday as 07/09

Did I review that all my hours are accurate?

Did I sign and date my TS?

Example: If the last day you worked was July 23rd - you would sign and date the TS as 7/23/yr.

Did my employer sign and date my TS?

Did I make sure hours submitted are worked on or before the TS due date and signed date?

Did I use standard time (not military time)?

Did I make sure the dates on the TS are for one pay period **ONLY** and do not cross with any other pay periods?

Did I make sure I did **NOT** use white-out to make corrections?

MARKING INSTRUCTIONS FOR TIMESHEET

- Write in **BLACK** or **BLUE** ink only.
 - Write as large and legible as possible without touching the sides of the boxes.
- Do not write outside of the boxes.**

Timesheets received that are missing any of the above information will be rejected and returned for correction. This may result in a delay of payment.

Once all check boxes are checked, please submit your timesheet to PremierFMS.

Why use portal timesheet?

- Eliminates the risk of filling out your timesheet incorrectly.
- Timesheets will be processed faster!
- It's paperless! Go GREEN!
- Can be submitted on any device with an internet connection (home, work, or smart phone).
- It is secure, confidential and can be accessed from any location at any time of the day, year-round.

For any questions or concerns, please contact our office at: **855.275.3948**