



If this time sheet is **Revised** and is intended to replace a previous version sent for this cycle, please check this box:

CONSULTANT TIME SHEET

FAX TO: 978-887-8740

Name: _____ **Period Covered:** ____/____/____ to ____/____/____

Client: _____ **Acct. Rep.:** _____

Consultant Signature: _____ **Client Signature:** _____

Project Description/Number	1 16	2 17	3 18	4 19	5 20	6 21	7 22	8 23	9 24	10 25	11 26	12 27	13 28	14 29	15 30	31	Total

So that we can pay you on time, please adhere to the Wellspring Pay Cycle Schedule when submitting time sheets. *Please:*

- **Submit your hours on time** by the due dates listed on the Wellspring Pay Cycle Schedule.
- If it's not possible to obtain a client signature by the due date, please send the time sheet to us anyway. Then follow up within 3 business days by sending us the signed version of your time sheet so we can release your check.
- **Send your time sheet only once.** If you must send in a revision to your time sheet, please check the "Revised" box above.
- **Make extra copies** of this time sheet before you use it the first time.
- Remember that Wellspring timesheets work on a semi-monthly cycle: the 1st through the 15th and the 16th through the 30th/31st.
- *If the client requires you to use their time sheet format, please use that instead of this version.*