

Work Log Form
At Home Property Management Company, LLC

Part I. Completed By Contractor. Contractor's Full Name: _____

Dates of Work From: / / To: / /

| Date | Start Time | Stop Time | Lunch/ Breaks | #Hours Worked | 1008GP | 1026GP | 1103GP | 1916MA | 1918MA | Apt# | Work Description (BR=Bedrm BA=Bathrm LR=Livingrm KIT=Kitchen) |
|------|------------|-----------|---------------|---------------|--------|--------|--------|--------|--------|------|---|
| ___ | ___ | ___ | () | ___ | ___ | ___ | ___ | ___ | ___ | ___ | _____ |
| ___ | ___ | ___ | () | ___ | ___ | ___ | ___ | ___ | ___ | ___ | _____ |
| ___ | ___ | ___ | () | ___ | ___ | ___ | ___ | ___ | ___ | ___ | _____ |
| ___ | ___ | ___ | () | ___ | ___ | ___ | ___ | ___ | ___ | ___ | _____ |
| ___ | ___ | ___ | () | ___ | ___ | ___ | ___ | ___ | ___ | ___ | _____ |
| ___ | ___ | ___ | () | ___ | ___ | ___ | ___ | ___ | ___ | ___ | _____ |

() Hours
Worked 1008GP 1026GP 1103GP 1916MA 1918MA

Total Number of Hours: = + + + + _____

←←← Part II.

Completed By Property Manager & Faxed to 415/435-2564

\$ ___/Hour Total Pay = \$ _____
 Reimbursement For Materials: \$ ___ \$ ___ \$ ___ \$ ___ \$ ___
 For Labor: \$ ___ \$ ___ \$ ___ \$ ___ \$ ___

Date Paid: _____ AHPMC Check #: _____

Part III. Completed By Bookkeeper. Date Received By AHPMC: _____ Date Entered Into QBP: _____