

COWORX STAFFING SERVICES LLC

For Retail Selling Specialists on assignment with Chanel, Inc.

Last Name	M.I.		Week End Date (Saturday)					CoWorx ID#								
Address				Apt #		Tel	ephone Nu	mber								
							()				-			
City			Z	Zip Code		ss:										
Indicate the First & Last Name of the appropriate Chanel Retail I	Manager (please print):															
By signing below, as an employee of CoWorx, I am declaring my time reported reflects true and accurate time worked and includes that I took and recorded all applicable breaks and/or meal periods, pursuant to CoWorx's Break and Meal Period Policy, as they pertain to the state in which I work. I am responsible to comply with the current version of the CoWorx Break and Meal Period Policy, which can be located at https://coworx.net/forms.asp?id=04253																
Signature:			D	Date:			Rate Per Hour			Total Ho	ours (less b	oreaks)	Tot	tal Amount D	ue	
Signature:			D	oate:			Rate Per Hour			l otal Ho	ours (less b	oreaks)	Tot	tai Amount D	ue	

This timesheet is to be used for <u>ONE</u> Sunday through Saturday week only - The department/counter manager must sign before submitting to CoWorx.

Please include your focus brand & the name of your Retail Manager in the spaces provided.

					Focus Value # (one per day)			Hou	rs Worked	t e	Retail Sales Generated					
Day Date	Date	Retailer	Door Name	Door#		Start Bi		eak	Stop Time	Total Hours	Dept./Counter Mgr's Signature	Color 100	Skincare 200	Woman's Fragrance 300	Men's	ОТН
					riitie	Start	Stop	Tille	Hours	700						
SA	AMPLE:	Macys	Herald Square	#03	011	10:00	1:00	1:30	6:00	7.5	D. Smith		\$95		\$175	<u> </u>
Sun																
Mon																
Tue																
Wed																
Thu																
Fri																
Sat																
Focu 00		Description National	•	Į.			Į.	1		Total Re	etail Sales per Brand:	\$	\$	\$	\$	\$

Focus #	Description
001	National
002	3 Axis
003	Fragrance Event
004	Makeup Event
005	Skincare Event
006	Fragrance Visual Week
007	Beauty Visual Week
800	Product Orientation
009	Basic Men's
010	Misc/Other
011	Basic Women's
012	Basic Beauty
013	Budgeted RSS
014	Boutique

This timesheet must be completed in its entirety & submitted to CoWorx <u>immediately following your last day worked</u> or <u>no</u> <u>later than 2:00 pm EASTERN TIME on Tuesdays</u>. You <u>MUST</u> have the department or counter manager sign the timesheet at the end of each shift. Missing information <u>will cause delays</u> in the processing of your timesheet. CoWorx cannot guarantee that your funds will be available on a regular schedule based on your submission date. After receipt & review of your timesheet, CoWorx will submit to Chanel for approval

Blank copies of timesheets are available online at https://www.coworx.net/forms.asp?id=04253

Upon completion of this timesheet, please submit directly to CoWorx Staffing at:

Fax number: 1-800-396-7680

EMAIL: CHTS@coworxstaffing.com

Should you have questions regarding the completion of your timesheet, please contact CoWorx Staffing at 1-800-754-7000, option 1, ext. 6991