



***ALL TIME CARDS ARE TO BE RECEIVED BY PAYROLL NO LATER THAN 12:00 NOON (CST) EVERY TUESDAY; IF NOT THEY WILL NOT BE PROCESSED UNTIL THE FOLLOWING PAY PERIOD

TIME CARD - Report All Time To The Nearest 0.25 Hour

Client _____
 Street Address _____
 City _____
 State _____ Zip _____
 Report To _____

	Date	Start	Lunch Out	Lunch In	End	Total	Overtime		
							Hours	Vacation	Initials
Monday:									
Tuesday:									
Wednesday:									
Thursday:									
Friday:									
Saturday:									
Sunday:									
Totals									

To be paid, all overtime must be initiated by a Supervisor.

Important for Client:

By execution of this contract Client certifies that: hours shown are correct, work was done satisfactorily and that the Client agrees to the terms and conditions on the reverse side of this contract.

Employee, Please complete the following:

I hereby certify that the hours shown were worked by me during the week ending shown above and were properly certified by an authorized representative of the company named below. I understand that I am to contact the office after completing the Assignment to determine if there is other work available for me. I agree that if I do not contact the office upon completing of an assignment they can assume I am not available.

PLEASE PRINT NAME HERE _____
 AUTHORIZED SIGNATURE OF CLIENT REPRESENTATIVE _____
 DATE _____

EMPLOYEE NAME (PLEASE PRINT) _____
 EMPLOYEE SIGNATURE _____
 SOCIAL SECURITY NO. _____

ARE YOU RETURNING TO THIS JOB?

Fax timecard to:

(214) 242-3922