



TIME SHEET

410.308.9050/ Fax 410.308.9055

<http://www.allproplacement.com>

All-Pro Placement Svc, Inc. is an equal opportunity employer

Timesheets must be faxed to our office no later than Monday morning 10am.

Employee Name: _____ **Title:** _____

Employee Phone: _____ **Fax:** _____

Company/Assignment: _____ **Address:** _____

Dates Worked	Days Worked	Start Time	Lunch out	Lunch Return	Time Out.	Total Hrs.
	Monday					
	Tuesday					
	Wednesday					
	Thursday					
	Friday					
	Saturday					
	Sunday					
WEEKLY TOTALS:						

By signing below, the employee attests that this is true and accurate record of hours worked and that all breaks and lunch periods, as required by law, have been taken.

Employee Signature: _____ **Date:** _____

Customer's signature below authorizes All-Pro to pay its employee and bill customer for the total hours worked and acknowledges acceptance of the terms below.

Supervisor Signature: _____ **Date:** _____

The person signing this time card represents that he/she is the Customer's authorized representative and hereby certifies that the hours shown on the timecard are correct and that the work was performed in a satisfactory manner, and further acknowledges the following:

- The All-Pro employee is assigned on the basis of a particular job description whose job duties are not to be changed without All-Pro's prior written consent.
- Customer represents that its work site complies with all OSHA and other applicable rules and regulations. Customer represents that the All-Pro employees will be/are included in Customer's safety programs and/or hazardous materials training.
- All-Pro employees shall not operate or drive any motorized vehicle or operate any machinery (except office machinery) without All-Pro's prior written consent.
- All-Pro assumes no responsibility if All-Pro employees handle cash, securities or other valuables without All-Pro's prior written consent.
- Customer is responsible if damages result from an All-Pro employee's performance of an unauthorized activity conducted on behalf of the Customer and/or from a breach of these provisions.
- An All-Pro accounting employee cannot render a professional opinion on any financial statement on behalf of All-Pro. An All-Pro employee cannot sign their name or the All-Pro name to any financial statement or any tax return while on an assignment to a Customer.
- All-Pro has incurred considerable cost and expense to advertise, recruit, evaluate and retain its temporary employees. In consideration of these services, Customer agrees that in the event the employee named on this timecard is employed by Customer, directly or indirectly, within 90 days from the last day of the employee's assignment with the Customer, Customer shall pay to All-Pro a fee of twenty five (25%) percent of the employee's annual billing rate.
- All-Pro employees are compensated on a bi-weekly basis. Payment is due upon receipt of the invoice. Customer will be billed for the hours shown on this time form. Overtime hours will be billed at one and one-half times the straight time billing rate and double time where applicable. In the event that the Customer fails to pay All-Pro's charges when due, Customer shall be responsible for and pay all collection and/or litigation costs incurred by All-Pro, including reasonable attorney's fees.
- Customer will comply with all applicable federal, state and local discrimination laws, statutes and regulations governing the employment of All-Pro employees
- It is the Customer's responsibility to keep the Customer's copy of this time form to verify and match with All-Pro's invoices.
- Employees are not authorized to work overtime without the written permission of his/her supervisor.