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TIME CARD



Personnel Agency 9000 Sunset Boulevard, Suite 705, Los Angeles, CA 90069 Tel. (310) 550-1002 Fax (310) 273-5845

PLEASE CHECK ONE: RETURNING ASSIGNMENT COMPLETED

NAME _____ WEEK ENDING _____

	DATE	IN	OUT	IN	OUT	TOTAL
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						

I certify that the above-named worked the hours listed on this Time Card TOTAL _____ HOURS _____ Temp's signature _____

TO TEMP:

1. Signed temp cards are required in order to receive paycheck.
2. No Temp is to return to company without authorization from agency.

TO EMPLOYER:

1. If you desire the service of this Temp in the future, please notify agency immediately
2. Temp employees referred by the Friedman Agency are our employees.
3. If a Temp Employee is retained, rehired or referred by your firm within 1 YEAR of referral by the Friedman Agency, a placement fee is due to the Friedman Agency.

Company's Name _____

Authorized Personnel (signature) _____