

Talent timesheet



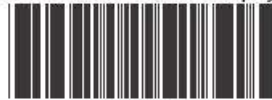
Talent signature below represents that talent agrees with all the terms and conditions on front and reverse sides.

Last name (print) _____ First name (print) _____ Social Sec. number _____
 Week end date (Sun.) _____ Location number _____ Time entered via IVR? yes no Branch number _____
 Signature _____ Date _____ Check mail pick up (specify) _____

	MM / DD	Start time	End time	Less meal time	Regular hours	Overtime hours	Total
Monday	/						
Tuesday	/						
Wednesday	/						
Thursday	/						
Friday	/						
Saturday	/						
Sunday	/						
Totals							

Client signature below represents that client agrees with all the terms and conditions on front and reverse sides. Please do not advance monies to employees.

Company _____ Department _____
 Authorized signature _____ Date _____



21629057

CORPORATE

Employee Statement

I certify that the hours shown were worked by me during the week indicated and that I have obtained authorization from the Tempforce client for any hours over 40 in the week. Upon completion of an assignment, I understand that I must contact Tempforce and request placement in a new assignment. If such contact is not made, Tempforce will consider me as having voluntarily quit employment. In addition, if I file a claim for unemployment benefits, my failure to contact Tempforce may affect the claim. I certify no accident or injury was sustained and no improper conduct occurred while working on the assignment unless written notice is attached. Timesheets submitted more than 60 days after the end of the assignment week are null and void.

Client Verification

It is understood that insurance coverage of Tempforce does not cover liability or property damage to client's equipment, machinery, materials or automobiles in the care, custody or control of Tempforce, its agents or employees unless a prior written agreement is received from Tempforce. Client agrees not to entrust Tempforce personnel with care, custody or control of cash, negotiables, or other valuable property. Full responsibility is accepted by client as a result of failure to comply with this request. As a Tempforce customer, client realizes that Tempforce has expenses in maintaining a pool of available staff (advertising, testing, reference checking, etc.) and that if client transfers any of Tempforce's employees during the employee's assignment to the client's payroll or to the payroll of any other entity, client will pay the applicable fee. There is a minimum charge per employee of four hours. Client agrees it will not directly or indirectly solicit for employment or alternative assignment any Tempforce employee either during the assignment or for six (6) months after the last assignment ended. Should client violate this provision, it shall pay to Tempforce a fee of 10% of the employee's annual salary. Client agrees to report any incident involving or concerns raised by any Tempforce employee while on assignment. Client acknowledges that this timesheet may be faxed, copied or imaged. If mathematical errors are determined, Tempforce personnel have the right to correct the error and not void the contract. Client agrees not to advance any monies without prior written consent. No oral statement of any person shall modify or otherwise affect the foregoing terms and conditions. By signing this timesheet, client agrees that he/she has signing authority to sign this timesheet, that the hours worked are correct and that service of a satisfactory quality has been provided. Client's signature represents approval for payment.