

TIME CARD

NAME: _____

SOCIAL SECURITY NO: _____ ASSIGNMENT NO: _____

WEEK ENDING SUNDAY: MO. _____ DAY _____ YEAR _____ ASSIGNMENT COMPLETED: YES NO

*IF YES, CALL PREFERRED

DAILY TIME RECORD

	START	LUNCH OUT	LUNCH IN	FINISH	DAILY TOTAL	TOTAL TIME
MON.						
TUES.						
WED.						
THURS.						
FRI.						
SAT.						
SUN.						

HR. MIN. HR. MIN. HR. MIN. HR. MIN. HR. MIN. HRS. MINS.

TOTAL TIME SUMMARY:

STRAIGHT TIME: _____ OVERTIME: _____

HRS. MINS. HRS. MINS.
 ROUND TO NEAREST 15 MINS. (0, 15, 30, 45)

CUSTOMER INFORMATION:

SIGNATURE & TITLE: _____

DIVISION/DEPARTMENT: _____

COMPANY NAME: _____

CITY & STATE: _____

SEE REVERSE SIDE FOR INFORMATION & TERMS CUSTOMER COPY

TIME CARD
General Instructions

- Use a new time card for each assignment and use a new time card each week.
- You are paid according to this record of time worked. Please be accurate. Incomplete or inaccurate time cards may cause your paycheck to be delayed.
- After completing this time card:
 - Detach this cover sheet.
 - Leave customer copy with customer.
 - Retain employee copy.
 - Mail pre-addressed payroll copy (hard copy).
- Mail your time card immediately upon completion of the assignment, or at the end of your work week, whichever is sooner.
- Call Preferred Temporary Services when —
 - You complete an assignment.
 - You will be working over 40 hours in one work week.
 - You have any questions or need any help.

A WORD ABOUT THIS TIME CARD

To Our Customer:

We sincerely thank you for using Preferred Temporary Services and request you:

1. Confirm the hours entered on this time card by our employee by signing your name and title.
2. Enter Division or Department, if appropriate.
3. Save this copy to match with our invoice.

Terms of Our Service

1. We will invoice you weekly for the hours listed on the time card. Make no payment directly to any Preferred Temporary Services, Inc. employee.
2. Overtime hours are billed at time and one-half.
3. Our employees cannot handle cash or valuables and will not drive a vehicle without our prior written consent.
4. There is a four hour minimum charge per day per employee.
5. The client acknowledges that substantial expenses have been incurred in providing these temporary services. Therefore, if you wish to hire our employee who performed the services shown on the time card within six months of the date on this time card, the client will first contact the Preferred Temporary Services, Inc. office to establish the manner in which Preferred Temporary Services, Inc. will be compensated for this expense.

Specific Instructions

1. **NAME.**
Clearly print your first name, middle initial and last name.
2. **SOCIAL SECURITY NUMBER.**
Enter your complete Social Security Number.
3. **ASSIGNMENT NUMBER.**
For each new assignment use the new Assignment Number given to you by Preferred Temporary Services.
4. **WEEK ENDING SUNDAY.**
Enter the date for the Sunday at the end of the week in which you are working.
5. **ASSIGNMENT COMPLETED.**
Indicate (X) whether or not assignment is completed. If assignment is completed, call Preferred Temporary Services immediately to state your availability.
6. **DAILY TIME RECORD.**
Record hours worked daily to the nearest minute. Enter start, finish and lunch time for each day worked. Compute the total hours worked for each day being certain to exclude the lunch time taken. Enter daily total. Total your daily hours for the week for this assignment and enter in Total Time box.
7. **TOTAL TIME SUMMARY.**
From Total Time box enter your total straight time and overtime hours. Round hours to the nearest 15 minutes. Enter up to 40 hours in the Straight Time box and overtime hours in the Overtime box.
8. **CUSTOMER SIGNATURE & DIVISION/DEPARTMENT.**
Have customer verify your hours and sign time card at the end of each week, or sooner if assignment is completed. Also have customer enter Division or Department, if appropriate.
9. **COMPANY NAME & CITY/STATE.**
Clearly print company name, city and state.