

EMPLOYEE TIME SHEET American Personnel and Temps 3450 Eastex Frwy. Beaumont, TX 77703 (409) 892-0310 FAX (409) 892-2957 <input type="checkbox"/> HOLD CHECK <input type="checkbox"/> MAIL CHECK <input type="checkbox"/> DIRECT DEPOSIT	WEEK ENDING	SS NO	EMPLOYEE LAST NAME			FIRST	MIDDLE
	DATE	TIME STARTED	TIME FINISHED	LESS LUNCH	HOURS WORKED	EMPLOYEE ADDRESS (STREET OR PO.)	
	MON					CITY	STATE
	TUE						ZIP CODE
	WED						NEW EMPLOYEE
	THU					EMPLOYEES WORKING AT MORE THAN ONE COMPANY DURING THE WEEK (MONDAY-SUNDAY) MAY NOT HAVE HOURS EXCEEDING 40 EXCEPT WITH AMERICAN'S PERMISSION. I CERTIFY THAT I HAVE WORKED THE HOURS LISTED ON THIS TIME SHEET.	
	FRI					I UNDERSTAND FAILURE TO CONTACT THE AVAILABLE LINE EACH AND EVERYDAY AFTER EACH ASSIGNMENT WILL CAUSE ME TO BE CONSIDERED UNAVAILABLE FOR WORK AND COULD EFFECT MY ELIGIBILITY FOR UNEMPLOYMENT BENEFITS. AVAILABLE LINE NUMBER IS 813-2008.	
	SAT					<input checked="" type="checkbox"/>	
	SUN					EMPLOYEE SIGNATURE ASSIGNMENT COMPLETED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
	TOTAL HOURS FOR WEEK TO NEAREST QUARTER HOUR						
CUSTOMER AGREEMENT: PLEASE READ BEFORE SIGNING (1) All hours over 40 per week, or those approved as overtime will be paid and billed at time and one-half. There is a 4 hour minimum charge. (2) I certify that the above "Regular Hours" and "Overtime Hours" are correct and approved for billing. (3) Customer agrees that the utilization of the above named person on either a temporary or permanent basis within six months from date of last time sheet will be through American. If customer desires to hire this person on a permanent basis, it is agreed that notification of this intent will be given to American and the person will remain on American's payroll for a period of 500 hours or a Release Fee will be charged for less than 500 hours. (4) Customer understands that the services provided by American Personnel are made possible as a result of sustained expenses in maintaining a large staff of personnel and agrees, therefore, that its utilization of this employee is on a temporary basis. Further, if legal action is required for collection of invoices, the customer is required for interest thereon and costs of collection thereof including reasonable attorneys' fees. (5) The undersigned is an authorized representative of the customer.							
SUPERVISOR'S SIGNATURE		TITLE		COMPANY NAME		DEPT.	DATE
X							

PINK: EMPLOYEE
 YELLOW: CUSTOMER
 WHITE: OFFICE