



tel: 202-861-4200 · fax: 202-861-4209
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Employee Time Sheet						WEEK ENDING SUNDAY	
EMPLOYEE NAME						LAST 4 DIGITS OF S.S. #	
COMPANY NAME							
COMPANY ADDRESS							
DAY	DATE	START	FINISH	LUNCH TAKEN	DAILY TOTAL HRS		
MON							
TUES							
WED							
THUR							
FRI							
SAT							
SUN							
RECORD HOURS TO NEAREST QUARTER HOUR (ex: 7.25 hrs, 8.5 hrs)					TOTAL REG HRS	TOTAL OT HRS	
					TOTAL HRS		
<div><input type="checkbox"/> Hold Check</div> <div><input type="checkbox"/> Mail Check</div> <div><input type="checkbox"/> Mail Direct Deposit Stub</div>							

Client: Your signature certifies that employee's hours are correct, employee's work was done satisfactorily, and client agrees to the terms and conditions on the opposite side. Client acknowledges four-hour minimum per employee per day.

Client named on the reverse side hereby agrees that the Temporary Personnel Service named on the reverse side (hereinafter called "CityStaff"):

1. Incurs substantial recruiting, screening, administrative, and marketing expenses in connection with the temporary employee ("Employee") named above. Client agrees that if Client hires Employee within 90 days after this date (either as a salaried employee or independent contractor) without agreement from CityStaff, Client will pay CityStaff's conversion charge.
2. Client certifies that the time set forth as hours worked is correct and that the work was performed in a satisfactory manner.
3. Client confirms the prior agreement between CityStaff and Client with respect to the services performed hereunder and any future services.
4. Client has not and shall not in the future, without prior written permission from CityStaff, entrust Employee with unattended premises, cash, negotiable instruments, or other valuables, or authorize Employee to operate machinery or motor vehicles.
5. Client shall not assign Employee to perform work other than that described at the time Client placed the job order.
6. CityStaff's insurance does not cover loss or damage caused by Employee operating Client's owned or leased motor vehicle(s), and Client therefore accepts full responsibility for claims, including the defense thereof, involving bodily injury, property damage, fire, theft, collision, cargo damage or public liability damages sustained or incurred as a result of Employee driving such vehicle(s), or arising out of or involving violation by Client of paragraph 4 or 5 above.
7. CityStaff is not responsible for claims made under its liability or bond insurance policies unless such claims are reported to CityStaff in writing by Client within 30 days after occurrence.
8. CityStaff is not responsible for claims for damage to property within Client's or Employee's care, custody and control.
9. In the event of Client's non-payment of CityStaff invoices, Client agrees to be responsible for all collection expenses, including attorneys' fees, interest and court costs.
10. Client must discuss all matters concerning Employee, including, without limitation, Employee's job assignments, wages and payroll procedures with CityStaff and with Employee directly.
11. Client shall indemnify and hold CityStaff, its subsidiaries, affiliates and agents, assignees and representatives, including the employer of record, harmless from any and all claims and damages arising out of Client's violation of employment laws, including, without limitation, OSHA, EEO and immigration laws.

SUPERVISOR SIGNATURE

DEPT