



Employee Name: _____

Last Four Digits of Social Security No.: _____

Week Ending Sunday: _____/_____/_____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Day	Date	Time Start	Less Lunch	Time Finish	Total Hours
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
Total Hours					

EMPLOYEE: I certify that the hours shown here represent the specific and total hours worked this week by me and were verified and agreed to by the client. I will immediately notify CHS if I am injured during an assignment. My signature confirms no work-related injuries occurred during the hours reported. I agree to immediately notify CHS at the conclusion of each assignment. If I fail to give such notice, I am not available, ready, willing, or able to work a reassignment.

CLIENT: I agree that the hours shown are correct, that the work was performed to CLIENT's satisfaction, and authorize CHS to bill CLIENT for the specific hours noted on this timesheet. CLIENT agrees that, in the event a CHS Employee works for CLIENT more than forty (40) hours in any workweek, CLIENT will pay an increase in the bill rate to reflect additional compensation plus applicable markup.

The signature of the employer or his agent on this timesheet constitutes full acceptance of all specific hours noted, conditions, and agreements on this timesheet.

ALL TIMESHEETS MUST BE RECEIVED IN OUR OFFICE BY 5PM ON MONDAY TO BE PROCESSED FOR THE WEEK'S PAYROLL. ANY TIMECARDS RECEIVED AFTER 5PM MAY BE DELAYED UNTIL THE FOLLOWING WEEK.

Employee Signature: _____

Client Approval: _____

Client Printed Name: _____

Client Title: _____

Equal Opportunity Employer – M/F/H/V/D

Carol Harris Staffing Accounting Dept.
Phone: 412-856-3666
FAX: 412-856-6019

TIMESHEET AGREEMENT

1. CLIENT agrees that Carol Harris Staffing, LLC's (hereinafter referred to as "CHS") obligation to CLIENT is limited to assigning employees with certain skills and abilities and, with regard to such employees, to maintain personnel and payroll records, calculate and pay wages, withhold and remit payroll taxes and other government-mandated charges (including workers' compensation), hire, assign, reassign, counsel, discipline and discharge, and handle work-related claims and complaints.

2. CLIENT agrees to pay Net upon Receipt of invoice, and to pay late charges on any unpaid balances from the date of receipt at the rate of 1.7% per month and any and all legal expenses and collection charge initiatives.

3. To the highest extent of the law, CLIENT agrees to defend, indemnify, and hold CHS harmless against any and all claims, losses, and liabilities that CHS incurs (including attorney's fees and costs) that are proximately caused by the fault, negligence, gross negligence, or recklessness of CLIENT or CLIENT's officers, employees, or authorized agents, that arise from CLIENT's breach of this Agreement and/or from risks inherent in CLIENT's business, or that are disclaimed by CHS.

4. CLIENT agrees not to entrust, and accepts full liability for entrusting, CHS Employees with unattended premises, any form of money or valuables, or confidential/trade secret information without the prior written permission of CHS. CLIENT will not request or permit any CHS Employee to use any vehicle, regardless of ownership, in connection with the performance of CLIENT's assignment.

5. CLIENT agrees not to directly or indirectly cause or permit any CHS Employee assigned to CLIENT to transfer to another entity's payroll, or to perform services for CLIENT while on the payroll of any person or firm other than CHS, during the term of the CHS Employee's assignment to CLIENT and for 180 days after such assignment ends. If CLIENT or any representative thereof violates this paragraph, they shall pay to CHS \$2,000 plus any and all legal expenses for each CHS Employee utilized in violation of this policy.

6. If CLIENT hires directly on to its own payroll, or engages as an independent contractor, a CHS Employee after the CHS Employee has worked at CLIENT's facility for at least 520 hours in any calendar year, with no break in service of more than 30 business days, CHS shall waive any fees or damages, provided that CLIENT has paid to CHS all invoiced amounts for the CHS Employee. If CLIENT does not abide by above procedure, CLIENT agrees to pay CHS any and all fees which result from the violation by the CLIENT.

7. It is agreed that the insurance furnished by CHS does not cover the operation of any motor vehicles by any CHS Employee unless expressly authorized by CHS in writing. Nor does it cover physical loss or damage of machinery, equipment, or materials while in the care, custody, or control of a CHS Employee.

8. It is agreed that the employer shall notify CHS of any and all changes in the duties of a CHS Employee from those originally described to CHS.

9. CLIENT is responsible to pay any and all fees and expenses incurred in the collection of all charges on their account.

10. Unless otherwise agreed upon, CLIENT will be invoiced for two hours show up time if a CHS Employee reports to work and is sent home for any reason without working at all. A CHS Employee is not authorized to work less than four hours in a day. If a CHS Employee reports to work, and works for any length of time, CLIENT will be invoiced for four hours.

11. No CHS Employee is authorized to lift over 25 lbs. unless specifics in lifting are authorized and agreed upon in writing by CHS. Objects appearing to weigh more than 25 lbs. should be team-lifted, distributing the weight among multiple individuals.

12. It is understood that the hours worked by one CHS Employee cannot be transferred to or borrowed from another CHS Employee in order to accumulate the required 520 hours for hire.

13. CLIENT and CHS Employee agree to notify CHS immediately of all work-related injuries. CLIENT agrees to instruct all injured workers to report to CHS immediately for post-incident drug and alcohol screening. If injury requires E.R. care, CHS Employee agrees to report to a CHS office immediately upon release from the E.R. Note: If the work related injury occurs after CHS hours of operation, M-F 8AM-5PM, CHS Employee must report to a CHS office immediately on the next open day of operation. If injury requires E.R. care, CHS Employee must request the E.R. to administer Drug & Alcohol Screening. Upon release from the E.R., CHS Employee must immediately bring all testing results and documentation to a CHS office on the next open hour of operation.

14. CLIENT agrees not to direct the medical care of injured workers, but to notify CHS to arrange medical directions.