

# Burnett's Staffing Time Sheet

**IMPORTANT:** ALL information must be complete and legible to avoid incorrect processing of your paycheck. Time sheets are subject to verification. Your Time sheet must be received in our office by 5:00 P.M. Monday in order to process payroll by 5:00 P.M. Thursday. You cannot be paid without your signature and the Client's signature. Once the time sheet is completed email to [accounting@burnetts.com](mailto:accounting@burnetts.com) or fax to our Corporate Office at 682.558.8271. Because we cannot always reach employees by phone or other means while they are on assignment, it is necessary to let your Burnett's Staffing Representative know of your availability to work. It is your responsibility to let your Burnett's Staffing Representative before the end of your assignment or within one (1) business day after the end of an assignment so that we can arrange another assignment for you. Failure to make yourself available by calling your Burnett's Staffing Representative may affect unemployment benefits. This form is your responsibility.



*"Making a Difference in the Life of Another Since 1966"*

[www.burnetts.com](http://www.burnetts.com)

EMPLOYEE NAME

SOCIAL SECURITY #

X X X — X X —

COMPANY

ADDRESS

CITY/STATE/ZIP

REPORT TIME

CO PHONE

REPORT TO

DEPARTMENT

INDICATE DATE AND AMOUNT OF TIME WORKED BELOW  
MUST BE VERIFIED BY SUPERVISOR IN ORDER TO BE PAID

DAYS WORKED	DATE	TIME IN	LUNCH OUT	LUNCH IN	TIME OUT	TOTAL TIME
SUN						
MON						
TUES						
WED						
THURS						
FRI						
SAT						

**TOTAL HOURS WORKED (TO NEAREST ¼ HOUR)**

I HEREBY CERTIFY THE HOURS SHOWN WERE WORKED BY ME DURING THE WEEK INDICATED AND I UNDERSTAND THAT I AM TO CONTACT MY SUPERVISOR UPON COMPLETION OF MY ASSIGNMENT AS THIS MAY AFFECT MY UNEMPLOYMENT BENEFITS.

X

EMPLOYEE SIGNATURE

## COMPANY APPROVAL SECTION TERMS AND AGREEMENT

It is understood that the individual signing the time sheet is an authorized representative of the Client and hereby certifies the hours listed are correct and that the work was performed in a satisfactory manner. Our minimum charge for any temporary assignment is four (4) hours per day and Client agrees to pay for such.

Client shall not advance cash or other valuables to Burnett's Staffing employees for any reason. Client will not entrust Burnett's Staffing employees with the care, custody or control of cash, negotiables, valuables or other similar property without first obtaining written permission from Burnett's Staffing, Inc. and then only when an employee's specific duties necessitate such activity unless assigned specially for the aforementioned purpose by Burnett's Staffing. It is understood and agreed that should a claim be made under Burnett's Staffing fidelity bond, the claim must be reported in writing to Burnett's Staffing within ten (10) days after the discovery of the occurrence and be prepared to file criminal charges for the alleged offense against the employee.

Unless assigned specifically for the purpose, the Client shall not authorize or cause Burnett's Staffing employees to operate machinery, automobiles, trucks, or other automotive equipment without first obtaining written consent from Burnett's Staffing. It is acknowledged, understood and agreed that the Client shall accept full responsibility for bodily injury, property damage, fire, theft, collision or public liability damage incurred as a result of a Burnett's Staffing employee operating such vehicles or machinery.

Client agrees that utilization of the employee, named on this time sheet, on either a temporary or a permanent basis within one (1) year from date on time sheet will be through Burnett's Staffing. If the Client desires to hire this person, it is agreed that written notification of this intent will be given to Burnett's Staffing, and the Client will pay liquidated damages in the amount of the normal direct placement fee charged by Burnett's Staffing at the time of hire, less any credit earned.

Client shall indemnify and hold Burnett's Staffing harmless from claims and demands arising out of the Occupational Safety and Health Act and the Americans with Disabilities Act as it relates to premises owned or controlled by the Client, and to which Burnett's Staffing, Inc. employees are assigned.

### CUSTOMER APPROVAL

CUSTOMER APPROVAL INCLUDES CERTIFICATION THAT THE HOURS WORKED ARE CORRECT AND ACCEPTANCE OF THE TERMS AND CONDITIONS LISTED ABOVE.

X

COMPANY SUPERVISOR SIGNATURE

**When completed email to [accounting@burnetts.com](mailto:accounting@burnetts.com) or fax to 682.558.8271**

For additional copies of this timecard, go to [www.burnetts.com](http://www.burnetts.com) then under the EMPLOYEE SERVICES menu, click on TIME CARD, and then click the print button