

THRIVAS

WEEK END DATE (SUNDAY) ___ / ___ / _____

TIMESHEET

FAX TIMESHEETS BY 12:00PM (NOON) ON MONDAY TO (954) 717-4432
TIMESHEETS RECEIVED AFTER 12:00PM MONDAY MAY DELAY YOUR PAYCHECK

LAST NAME

FIRST NAME

SOCIAL SECURITY #

CLIENT NAME

SUPERVISOR

CLIENT PHONE

Please read the TIMESHEET INSTRUCTIONS posted in the Employee Tools link at www.thrivas.com before completing.

DAY	DATE	TIME IN	TIME OUT	TIME IN	TIME OUT	HOURS
MONDAY						
TUESDAY						
WEDNESDAY						
THURSDAY						
FRIDAY						
SATURDAY						
SUNDAY						

	REGULAR HOURS	
X _____	OVERTIME HOURS	
EMPLOYEE SIGNATURE EMPLOYEE: I certify that the TOTAL hours reported here are true and correct ACTUAL hour worked.	TOTAL HOURS	

X _____

AUTHORIZED CLIENT SIGNATURE **CLIENT PRINTED NAME** **DATE**

CLIENT: As the Client, I agree that the TOTAL hours reported are true and correct ACTUAL hours worked and the work performed was satisfactory.

Client Agreement: Thrivas hereby agrees to provide to Client personnel, who shall fill temporary or temporary to permanent or permanent employment and/or staffing positions (as appropriate, "Staff") with or for Client. Thrivas shall employ its reasonable best efforts to provide Staff appropriate to Client's requirements in accordance with criteria which shall be provided by Client. While on assignment with Client, Staff shall be agents of Client and not of Thrivas. Client shall bear sole responsibility and liability for Staff's intentional and/or negligent acts and/or omissions while on assignment with Client and Thrivas shall bear no responsibility or liability therefore. However, if Client provides written notice via facsimile to Thrivas within three (3) hours after the arrival of Staff that Staff's performance is unsatisfactory, Client, as its sole and exclusive remedy for any and all claims hereunder, shall not be charged for said Staff's placement or service and Thrivas shall use its reasonable best efforts to assign appropriate replacement Staff to Client. Thrivas shall bill Client weekly for services rendered. Client's payment for such services shall be due immediately upon receipt of Thrivas's bill or invoice. Overtime hours worked by Staff shall be billed at either 1 1/2 or 2 times the Rates, in accordance with state law. All payments by Client which are over 1 week past due shall be subject to an additional monthly 1.5% surcharge on the billed amount, in addition to any applicable attorney's fees and/or related costs incurred by Thrivas in connection with collection of the billed amount. Client agrees that, if Client, without the written consent of Thrivas hires any Staff within twelve (12) months after the last day of such Staff's placement with Client by Thrivas or employment by Thrivas, Client shall pay Thrivas a fee of 30% of employee's annual salary. Client agrees to release, indemnify, defend and hold harmless Thrivas (together with Thrivas's officers, directors, shareholders, agents, employees, heirs, successors and assigns) from and against any claims (including workers' compensation claims), expenses and/or liabilities arising from or in connection with the performance of this Agreement by either party or by Staff.