



TIMECARDS MUST BE RECEIVED BY SUNDAY MIDNIGHT FOR TIMELY PROCESSING

Hourly Employee Timecard

Employee Name:		W/E Date:	
SS #		Purchase Order # :	
Customer:		Assignment # :	

*Time will be rounded to nearest quarter of the hour.

Date	Day	Time In	Time Out	Lunch	Regular Hours	Overtime Hours	Double Time Hours
	Mon						
	Tues						
	Wed						
	Thurs						
	Fri						
	Sat						
	Sun						

Total Hours:			
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Authorization

Employee Signature	Employee Printed Name

Customer Signature	Customer Printed Name

EXECUTION OF THIS FORM BY THE CLIENT CONSTITUTES CERTIFICATION THAT THE TOTAL HOURS LISTED ARE CORRECT AS STATED, AND THE WORK WAS PERFORMED IN A SATISFACTORY MANNER, AND THE SERVICES WILL BE PAID FOR AT THE AGREED UPON RATE

For additional information on Contract Staffing with United Human Capital Solutions contact
 Emmy Hansen at ext 108 or Gabrielle Cornell at ext 152