



TIMESHEET

Pay periods run from Saturday - Friday with Friday being the last day of the pay period. Please fill out your timesheet accordingly.

Employee Name

Client or Facility Name

DAY	DATE	UNIT	TIME IN	TIME OUT	LUNCH BREAK	TOTAL HOURS	ON CALL HOURS			CALL BACK HOURS			ORIENT/OT HOURS	CLIENT SIGNATURE
							IN	OUT	TOTAL	IN	OUT	TOTAL		
SAT														
SUN														
MON														
TUE														
WED														
THR														
FRI														
TOTALS														

<p>Employee signature constitutes the following: I recognize the rights of Plexsum Staffing Solutions, Inc. as the employer and agree not to employ by the facility individually or through an agent for a period of at least ninety (90) days written notice following the termination of this assignment without approval of Plexsum Staffing Solutions, Inc.</p> <ul style="list-style-type: none"> The above hours were actual hours worked and were verified by a representative of the facility authorized to approve timesheets. The above hours need to exactly match any daily time logs used by the facility. Daily time logs used by the facility will supersede hours noted on Plexsum timesheets and adjustments will be made accordingly. I certify that no injury was incurred by me during this agreement. 	<p>Client signature constitutes the following:</p> <ul style="list-style-type: none"> The signer is authorized to approve timesheets. Acceptance of hours and satisfaction with Employee's work. The above hours match any daily time logs used by facility. Client agrees to provide Plexsum payment for services according to the terms and conditions of the agreed upon contract. No credits will be given once Employee is paid.
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Employee Signature

Client Signature

If you are a traveler and working away from your tax residence and receive Per Diem pay, you agree to the terms stated in the Employee Handbook.

PLEASE SUBMIT AFTER LAST SHIFT WORKED FOR THE WEEK. MUST be received by SATURDAY 12:00 PM EST

FAX: 1-814-954-5943 EMAIL or TEXT: timecard@plexsum.com