Time Sheet



Week Of: \_\_\_\_\_\_\_\_\_\_ — \_\_\_\_\_\_\_\_\_\_

18 Corporate Hill Dr, Ste 200

Little Rock, AR 72205

Phone: 501-801-7626

Fax: 501-232-2812

Email: payroll@apexstaffing.net

Timesheets must be signed by a supervisor and are due via fax/email on Monday by noon.

|  |
| --- |
| COMPANY NAME: |
| Employee name:  |
| EMPLOYEE SIGNATURE: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Start Time | LUNCH OUT | LUNCH IN | End Time | HOURS |
| MONDAY |  |  |  |  |  |
| TUESDAY |  |  |  |  |  |
| WEDNESDAY |  |  |  |  |  |
| THURSDAY |  |  |  |  |  |
| FRIDAY |  |  |  |  |  |
| SATURDAY |  |  |  |  |  |
| SUNDAY |  |  |  |  |  |

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| --- |
|  |

TOTAL HOURS

It is hereby certified that the hours totaled above are correct. We agree to pay Apex Staffing the amount billed upon receipt of invoice. The service rendered by Apex Staffing is made possible only by a substantial investment in advertising, testing and training a staff of personnel. Therefore, in consideration for this service being made available to us, we agree, that in the event this employee becomes employed by us before the contract period is completed, we will pay an employee buyout service fee to Apex Staffing.

|  |  |
| --- | --- |
| Supervisor signature: | Date:  |