



**MONROE STAFFING SERVICES LLC**

**FAX: (203) 268-3169**

**FAX: (203) 459-9678**

P.O. Box 187

Monroe, CT 06468

1-888-845-9675

- 1. Always check hours worked for accuracy.
- 2. Time card must have authorized Client signature
- 3. Time cards must be faxed or delivered no later than Monday 10am

BY SIGNING THIS TIMECARD YOU AGREE TO THE TERMS AND CONDITIONS ON REVERSE, CERTIFY THAT THIS FORM IS ACCURATE AND TRUE AND THAT NO INJURIES WERE SUFFERED DURING THE WEEK WORKED.

Employee Signature	Print Name
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**OFFICIAL MONROE STAFFING SERVICES LLC EMPLOYEE TIME CARD**

Week Ending Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Total Hours Worked

Day	Start	Finish	Lunch ½ hour in 6	Regular	OT
SUN	AM PM	AM PM			
MON	AM PM	AM PM			
TUE	AM PM	AM PM			
WED	AM PM	AM PM			
THU	AM PM	AM PM			
FRI	AM PM	AM PM			
SAT	AM PM	AM PM			
Indicate Actual times worked above					

CHECK HERE IF NEW ADDRESS: \_\_\_\_

NEW: \_\_\_\_\_

Will Assignment Continue? YES \_\_\_\_ NO \_\_\_\_

Authorized Client Signature	Date:	Print Client Company
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## **CLIENT CONTRACT:**

We, The Client, agree that for a period of 90 days after their completion of their assignment with us we will not hire directly or through another agency the person in connection with whose assignment we are completing.

We agree that unless we have secured your prior written consent we will not permit any of your employees to operate any motor vehicles either owned by us or otherwise. We accept full and total responsibility for all claims arising from operation by any of your employees of any motor vehicles either owned by us or otherwise.

We agree that as part of your employees first day we will make them aware of any safety regulations and requirements and will provide adequate training and safety equipment or clothing on any task, machinery or equipment required for that equipment or operation.

For consideration of the employment services rendered, and to extend credit to purchase such labor and services from Monroe Staffing Services LLC the undersigned Client agrees and promises to the following terms and conditions:

A late fee of 1% will apply for each month payment is late. In addition, we agree that you have the right to discontinue service, at any time, if there are unpaid charges outstanding. We agree that should it be necessary to send the bill to a collection agency or an attorney for collection, we shall be responsible to pay all costs of collection including, without limitation, court costs and reasonable attorney's fees incurred by Monroe Staffing Services LLC.

We fully understand your credit terms and conditions and agree to the payment terms.

Monroe Staffing Services LLC reserves the right to modify this agreement at any time.

**CLIENT COMPANY:** Execution of this time card certifies that the total number of work hours indicated on reverse side is correct and was satisfactorily performed during the time and period noted.

## **EMPLOYEE CONTRACT:**

I understand that I am regarded as an "employee at will" and as such my employment may be terminated at any time with or without cause.

If in the event I am ever hurt while on the job I agree to notify you as quickly as possible.

I will refrain from divulging all company proprietary knowledge including but not limited to: my hourly rate, billing rates or other company business, unless authorized by you to do so, acquired by me during my employment with Monroe Staffing Services LLC to any Client, competitor or other firm involved in direct or temporary placement.

Failure to agree to or comply with the above may result in my immediate termination.

Monroe Staffing Services LLC reserves the right to modify this agreement at any time.

**Employee certifies no accident or injury was sustained while working on the assignment unless so noted in the comments section.**