

1. Fill out the time card completely, have supervisor sign it and leave customer copy with supervisor.

2. Fax in hours to SELECTSTAFF at 508-872-3456 by 5:30 pm Monday. If hours are late, check will be delayed one week.

3. Return original time card to SELECTSTAFF. Checks will not be released unless time card is received.

4. Contact SELECTSTAFF when assignment is complete.



60 Worcester Road
Framingham, MA 01702
(508) 872-5400

SELECTSTAFFSM
A Division of Select Staffing Solutions, Inc.

MO DAY YR

____/____/____
Week Ending Saturday

Company Name _____

Employee Name _____

Employee No. _____

Employee Signature _____

I certify that these hours are correct and were properly verified by an authorized client representative. Please notify SELECTSTAFF when your assignment has been completed to advise us of your availability so that we can maintain proper records. If you do not contact us, we may assume that you are no longer available for future assignments. Failure to do so will result in our assumption of your voluntary termination from SELECTSTAFF and may impact your eligibility for unemployment benefits.

Customer Signature _____

Important for Clients: We certify that we fully accept all information on this card, the hours shown are correct, all work was performed in a satisfactory manner, we agree to the terms and conditions on the reverse side of this form and I am authorized to sign on behalf of my company.

Assignment Completed Yes No

| | STARTING TIME | FINISH TIME | LESS LUNCH | DAILY HOURS WORKED |
|-----|---------------|-------------|------------|--------------------|
| SUN | | | | |
| MON | | | | |
| TUE | | | | |
| WED | | | | |
| THU | | | | |
| FRI | | | | |
| SAT | | | | |

TOTAL HOURS FOR WEEK
ROUND OFF TO THE NEAREST QUARTER HOUR

(WRITE TOTAL HOURS IN WORDS)

STRAIGHT TIME

OVER TIME

Terms and Conditions

1. CLIENT agrees that Select Staffing Solutions, Inc./ SELECTSTAFF's obligation to CLIENT is limited to assigning employees (Assigned Employees) with certain skills and abilities and, with regard to such employees, to maintain personnel and payroll records; calculate and pay wages; withhold and remit payroll taxes and other government-mandated charges (including workers' compensation); hire, assign, and reassign, counsel, discipline and discharge; and handle work-related claims and complaints.
2. CLIENT'S signature on this timesheet certifies that the hours are correct, that the work was performed to CLIENT'S satisfaction and authorizes Select Staffing Solutions, Inc./SELECTSTAFF to bill CLIENT for such hours. CLIENT agrees that, in the event an Assigned Employee works for CLIENT more than forty (40) hours in any workweek, CLIENT will pay an increase in the bill rate to reflect such additional compensation plus applicable markup.
3. CLIENT agrees to pay Net Upon Receipt of invoice, and to pay late charges on any unpaid balances after 90 days from the date of receipt at the rate of 1.5% per month (Annual Percentage Rate of 18%) or the maximum legal rate, whichever is higher. CLIENT shall be liable for all reasonable attorney's fees and other costs incurred by SELECTSTAFF to collect charges and/or unpaid invoices.
4. CLIENT agrees that it will not entrust Assigned Employees with unattended premises, cash, checks, keys, credit cards, merchandise, confidential or trade secret information, negotiable instruments, or other valuables without the express prior written permission of Select Staffing Solutions, Inc./SELECTSTAFF and then only under Select Staffing Solutions, Inc./SELECTSTAFF's direct supervision and control, and that it will not request or permit any Assigned Employee to use any vehicle, regardless of ownership, in connection with the performance of services for the CLIENT.
5. CLIENT agrees not to directly or indirectly cause or permit any Assigned Employee assigned to CLIENT by Select Staffing Solutions, Inc./SELECTSTAFF to transfer to another entity's payroll, or to perform services for CLIENT while on the payroll of any person of firm other than Select Staffing Solutions, Inc./SELECTSTAFF during the term of the Assigned Employee's assignment to CLIENT and for 90 days after such assignment ends. If CLIENT violates this paragraph, then CLIENT shall pay to Select Staffing Solutions, Inc./SELCTSTAFF a fee in the amount of 25% of the Assigned Employee's annualized compensation, or \$3,000, whichever is greater.
6. If CLIENT hires directly on its own to payroll, or engages as an independent contractor, an Assigned Employee after the Assigned Employee has worked at CLIENT's facility for at least 480 consecutive hours, Select Staffing Solutions, Inc./SELECTSTAFF shall waive any placement fee, conversion fee, or liquidated damages, provided that CLIENT has paid to Select Staffing Solutions, Inc./SELECTSTAFF all invoiced amounts for such Assigned Employee. In the event that CLIENT hires or engages as an independent contractor any Assigned Employee prior to such 480 hours, CLIENT shall pay to Select Staffing Solutions, Inc./SELECTSTAFF \$3,000.