

Email PeopleTime@peopleshareworks.com

FAX 610-326-9574

ALL FIELDS ARE REQUIRED IN ORDER TO PROCESS YOUR HOURS ON TIME

[For additional timesheets visit - www.peopleshareworks.com](http://www.peopleshareworks.com)

PeopleShare must receive this timesheet by 5PM on Monday to assure that your check is processed by Friday. To confirm that **PeopleShare** has received your timesheet, email PeopleTime@peopleshareworks.com or call (610) 326-6375.

Company Name		Week Ending Date (Sunday)		Hours to the nearest quarter hour						
Address		City, State, Zip		Day	Date	Started	Finished	Lunch	Hours Worked	
SSN (last 4 digits)		X X X - X X - _____		Mon						
Employee: I certify that the hours shown herein represent the total hours worked this week by me, and were properly verified by the client and that I understand I must provide a minimum of one-week notice prior to leaving my assignment. If I do not provide at least one-week notice to PeopleShare prior to leaving my assignment I will be paid MINIMUM WAGE for all remaining hours due to me for that assignment. Employee certifies no accident or injury was sustained while working on the assignment.				Tue						
				Wed						
				Thu						
				Fri						
				Sat						
Employee Name (Please Print)				Sun						
Employee Signature										

Service Agreement - Terms and Conditions

It is understood that the undersigned is an authorized representative of Customer, and hereby certifies that the hours reported by employee are correct and that the work was performed satisfactorily. Customer acknowledges that PeopleShare, Inc.'s insurance does not cover loss or damage caused by PeopleShare Inc.'s employees operating Customer's owned or leased motor vehicles. Also, Customer accepts full responsibility for all claims and demands, including, but not limited to, those for bodily injury, property damage, fire, theft, collision, cargo damage, or public liability damage, arising from or relating to employee driving such Customer vehicles or under OSHA as it relates to premises owned or controlled by Customer (a "Covered Claim"). Customer shall defend, indemnify and hold PeopleShare, Inc., its shareholders, directors, officers and employees, harmless from all claims and demands (including litigation costs and attorneys fees) arising from or relating to a Covered Claim.

Customer agrees that utilization of the above named employee on either a temporary or a permanent basis within 6 months from date on timesheet will be through PeopleShare, Inc. If Customer desires to hire this person on a permanent basis, it is agreed that notification of this intent will be given to PeopleShare, Inc. and that the person will remain on PeopleShare, Inc.'s payroll for a period of 525 regular hours from date of notification and that upon violation of this restriction Customer agrees to pay PeopleShare, Inc., a fee equal to 20% of the employee's annual salary (a "Buyout Fee").

This PeopleShare, Inc. employee is compensated on a weekly basis. Therefore, Customer will be billed weekly. Payment will be due upon receipt of PeopleShare, Inc.'s invoice. Customer will be billed for the hours shown on this timesheet at the agreed upon rate. Overtime hours will be billed at one-and-a-half times the straight time billing rate. In the event Customer fails to pay any invoice amount (whether for the temporary service, Buyout Fee, or other fee) when due, Customer shall pay all of PeopleShare, Inc.'s costs related to collection of the past due amount, including litigation costs and attorney's fees. The parties agree that this contract was entered into at PeopleShare's headquarters in King of Prussia and that all disputes arising from or relating to this Agreement shall be commenced, litigated and concluded in the state or federal courts having jurisdiction in Montgomery County, Pennsylvania. This Agreement may not be altered or amended except in writing signed by both parties.

Client		Regular	Overtime
Total hours to the nearest quarter hour. Minimum four (4) hours per employee per day. Overtime is paid on hours over 40 hours per week.			
Client Name (Please Print)		Total Hours →	
Client Authorized Signature			
Is this employee continuing this assignment?		<input type="checkbox"/>	YES
		<input type="checkbox"/>	NO
Client: Your signature represents that you are in agreement with all the terms and conditions located at the bottom of this page and that the hours shown are correct and the work was completed satisfactorily.			