

1. PLEASE PRESS HARD – YOU ARE MAKING 3 COPIES
2. LEAVE GREEN COPY WITH CLIENT
3. RETURN WHITE COPY TO ASSET
4. RETAIN BLUE COPY FOR YOUR RECORDS



30 Broad Street • Suite 1202 • New York, NY 10004
 Phone (212) 430-1060 • Fax (212) 481-3447
 Payroll / Human Resources

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 Phone (201) 418-9500 • Fax (201) 418-9155

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150 SE 2nd Avenue • Suite 712 • Miami, FL 33131
 Phone (305) 371-5969 • Fax (305) 371-5979

Time Sheet Fax #: (212) 481-3447

CLIENT'S NAME (PRINT) _____

REPORT TO _____

LOCATION _____

EMPLOYEE

EMPLOYEE'S NAME (PRINT) _____

SOCIAL SECURITY NO.

MY PAY CHECK SHOULD BE:

MAILED HELD DOWNTOWN HELD HOBOKEN HELD MIAMI HELD PARLIN

I certify the hours shown on this time record are correct, and that I performed the service as required in Asset's Guidelines. I have read the Employee's Terms & Conditions on the reverse side of this form and agree to adhere to them. I understand that Asset will assume that I am no longer available for work if I do not immediately contact them when my assignment ends.

EMPLOYEE'S SIGNATURE **X** _____

	HOURS WORKED				
	DATE	TIME IN	TIME OUT	LESS LUNCH TIME	TOTAL HOURS FOR DAY
MON		AM		AM	
		PM		PM	
TUES		AM		AM	
		PM		PM	
WED		AM		AM	
		PM		PM	
THUR		AM		AM	
		PM		PM	
FRI		AM		AM	
		PM		PM	
SAT		AM		AM	
		PM		PM	
SUN		AM		AM	
		PM		PM	
NO ALTERED OR UNSIGNED TIME SHEETS ACCEPTED				TOTAL NUMBER HOURS WORKED FOR WEEK →	

Overtime: Time and one-half will apply if our employee works over 40 hours in any one week starting Monday and ending Sunday. We certify the hours indicated are correct, and that the work performed was satisfactory. We have read the Client's Terms and Conditions on the reverse side of this form and without any limitation agree to adhere to them.

IS THIS ASSIGNMENT COMPLETED? YES NO

CLIENT'S SIGNATURE _____

PRINT NAME _____ DATE _____

DEPT/CC# _____ (TEL. NO./EXT.) _____

EMPLOYEE TERMS & CONDITIONS

I understand that I am an employee of ASSET STAFFING, INC. and/or ASSET STAFFING OF SOUTH FLORIDA, LLC and/or NORTH-POINTE PERSONNEL, a division of ASSET STAFFING of NJ, LLC ("ASSET"), and/or ASSET STAFFING of CENTRAL NJ, LLC d/b/a FLEX STAFFING RESOURCES that my employment is at will, and that I will not accept permanent employment with any ASSET client, either directly, as an independent contractor or through the services of another employment service, for a period of one hundred twenty (120) days from the end of my assignment with any ASSET client without prior written approval from ASSET.

Immediately contact your ASSET representative if

- (A) You are injured on the job or have any concern about your safety.
- (B) You feel that you are or have been the victim of harassment including inappropriate language or physical contact.

Consistent with the Federal Arbitration Act, I am required to submit all employment-related disputes to arbitration rather than litigation.

CLIENT TERMS & CONDITIONS

We certify that the total hours shown are true and correct, and this signature is authorized to bill the named company (the "Customer") for these hours. We understand that this person is an employee of ASSET STAFFING, INC. and/or ASSET STAFFING OF SOUTH FLORIDA, LLC and/or NORTHPOINTE PERSONNEL, a division of ASSET STAFFING of NJ, LLC ("ASSET"), and/or ASSET STAFFING of CENTRAL NJ, LLC d/b/a FLEX STAFFING RESOURCES and is referred to us on a temporary basis while searching for employment. In the event we employ this person on our payroll, or if we utilize the services of ASSET'S employee through the services of another employment or outsourcing service or as an independent contractor, we agree to pay to ASSET its standard placement fee for permanent employee placement pursuant to its fee schedule then in effect. (A copy of the current fee schedule of ASSET may be obtained upon request).

Unless otherwise stipulated by ASSET in writing all past due invoices will be subject to services and/or collection fees, including its reasonable attorney's fees and expenses.

Being duly authorized on behalf of the Customer, the under signed hereby (1) certifies that the hours set forth on the reverse side hereof are correct and that the work was performed in a satisfactory manner; (2) confirms prior agreement between ASSET and Customer, with respect to the services performed hereunder and any future services that (a) Customer shall not entrust ASSET employees with unattended premises, cash, negotiables or other valuables or authorize such employees to operate machinery or motor vehicles without the prior written consent of ASSET in each instance, (b) ASSET insurance does not cover loss or damage caused, directly or indirectly, from the operation of Customer's owned or leased motor vehicle(s) by ASSET employees and Customer therefor accepts full responsibility for any and all claims resulting therefrom, including without limitation, claims for bodily injury, property damage, fire, theft, collision, cargo damage or public liability damage sustained or incurred as a result of ASSET employee operating such vehicle(s), or arising out of or involving violation by Customer of paragraph (2) (a) above, (c) ASSET is not responsible for claims made under its Fidelity Bond unless such claims are reported in writing to it by Customer within 30 days after the occurrence of an event giving rise to a claim, (d) Customer shall indemnify and hold ASSET harmless from any and all claims and demands arising out of the Occupational Safety and Health Act as it relates to premises owned or controlled by Customer and to which ASSET employees are assigned. The Customer recognizes ASSET "employer-employee" relationship with its personnel, and accepts the obligation to discuss all matters with ASSET concerning their employment, including, without limitation, job assignments, permanent placement with the Customer and payroll procedures.