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|-------------------------------|------------------------------|-----------------------------|---------------------------|-----------------|--|
| Your Name | | | | | |
| Social Security Number | | | | | |
| Assignment Complete | <input type="checkbox"/> YES | <input type="checkbox"/> NO | Week Ending Sunday | MO / DAY / YEAR | |

| Time Record By Day | | | | | |
|--|------|-------|--------|------------|--------------|
| | Date | Start | Finish | Less Lunch | Total Hours |
| Mon | | | | | |
| Tues | | | | | |
| Wed | | | | | |
| Thu | | | | | |
| Fri | | | | | |
| Sat | | | | | |
| Sun | | | | | |
| I agree that the above information is correct and that falsification of this time record is grounds for termination. I certify that I have received all break and meal periods to which I am entitled. I understand that my time record must reach Arrow Staffing by 9AM Monday to be paid Friday. | | | | | TOTAL |
| Associate Signature | | | | | |

| | | | | | |
|---------------------|--|--|--|--|--|
| Company Name | | | | | |
| Department | | | | | |
| City/State | | | | | |

| Client Verification and Agreement | |
|--|--|
| Total Hours Worked | |
| Client Signature And Title | |
| <p>The above client signature authorizes and certifies that the Arrow Staffing associate named on this time record worked the hours indicated with services performed satisfactorily. Client understands and accepts responsibility for the supervision and training of Arrow Staffing employees on its premises. Client will ensure the necessary safety equipment for Arrow employees. Client agrees to defend, indemnify and hold harmless Arrow Staffing from all fines, penalties and assessments incurred by Arrow. Client agrees that no insurance is afforded Arrow Staffing for physical loss or damage to Client's machinery, equipment, material, vehicle or facility in the care or control of Arrow Staffing, and that Arrow is not liable damage or physical loss to said property caused by Arrow Staffing, its agents or employees. Client accepts full responsibility for claims involving bodily injury, property damage, fire, theft, collision incurred as a result of an Arrow employee. Client will not entrust Arrow employees with the care or control of premises, cash negotiables or valuables and will not authorize Arrow employees to operate machinery or vehicles without prior written notice from Arrow Staffing. Client agrees that Arrow has incurred substantial expense for advertisement, recruiting, testing and training of its personnel, and that during any temporary assignment or within 180 calendar days after the assignment ends, if any Arrow associate is hired by client or any of its affiliates, Client agrees to pay Arrow a placement fee of 20% of the employee's estimated annual salary. Client agrees that invoices are due and payable upon receipt and that payments made after 30 days from the invoice date will include a late charge equal to 5% of the invoice amount. Client agrees to bear the cost of collection and any legal recourse taken by Arrow Staffing to enforce this agreement. The client agrees to all the terms and conditions as stated.</p> | |




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