

EMPLOYEE INSTRUCTIONS

- 1. PLEASE PRESS HARD. YOU ARE MAKING 3 COPIES
- 2. LEAVE LAST COPY ONLY WITH CUSTOMER.
- 3. SEND BALANCE OF SET INTACT TO LANDRUM OFFICE.
- 4. BE SURE TO INCLUDE YOUR S.S. NO.
- 5. **TIME SHEET DEADLINE 10 A.M. MONDAY**

LANDRUM STAFFING SERVICES

P.O. BOX 15700 • PENSACOLA, FLORIDA 32514 • (850) 476-5100

EMPLOYEE NAME	LAST	FIRST	MIDDLE	SOCIAL SECURITY NUMBER	XXX	XX
COMPANY #	WORK ORDER #	WORK CLASS #	DEPARTMENT			
FIRM NAME			REPORT TO			

CUSTOMER AGREEMENT

CUSTOMER AGREES TO THE TERMS ON THE REVERSE SIDE OF THIS DOCUMENT, THAT THE UTILIZATION OF THE ABOVE NAMED PERSON ON EITHER A TEMPORARY OR PERMANENT BASIS WITHIN SIX MONTHS FROM DATE ON TIME SHEET WILL BE THROUGH LANDRUM. IF CUSTOMER DESIRES TO HIRE THIS PERSON ON A PERMANENT BASIS, IT IS AGREED THAT NOTIFICATION OF THIS INTENT WILL BE GIVEN TO LANDRUM AND THE PERSON WILL REMAIN ON LANDRUM'S PAYROLL FOR A PERIOD OF AT LEAST FIFTEEN WEEKS FROM DATE OF NOTIFICATION.

* I CERTIFY THAT THE TOTAL HOURS ARE CORRECT. (REG. & OVERTIME)

CUSTOMER SIGNATURE _____ TITLE _____
 X

PLEASE **ASSIGNMENT CONTINUING** **COMPLETED**

CUSTOMER INSTRUCTIONS

- 1. RETAIN LAST YELLOW COPY FOR YOUR RECORDS.
- 2. FOUR (4) HOUR MINIMUM PER DAY REQUIRED (DOES NOT APPLY TO PAYROLL FACTORED EMPLOYEES).

EMPLOYEES WORKING AT MORE THAN ONE COMPANY DURING THE WORK WEEK MAY NOT HAVE HOURS EXCEEDING 40 EXCEPT WITH LANDRUM'S PERMISSION.

I CERTIFY HOURS INDICATED HAVE BEEN WORKED FOR THE ABOVE COMPANY AND APPROVED BY MY SUPERVISOR.

IF YOUR ASSIGNMENT SHOULD END FOR ANY REASON, YOU MUST CONTACT LANDRUM'S STAFFING SUPERVISOR WITHIN THREE BUSINESS DAYS FOR POSSIBLE REASSIGNMENT. FAILURE TO DO SO MAY RESULT IN DENIAL OF UNEMPLOYMENT BENEFITS.

EMPLOYEE SIGNATURE _____

Week Ending Date (Sat.) / / CHECK HANDLING
 Mail _____
 Hold _____

DAY	DATE	TIME STARTED	TIME FINISHED	LESS LUNCH PERIOD	DAILY HOURS	
					REG. HRS.	OVERTIME
SUN.						
MON.						
TUE.						
WED.						
THU.						
FRI.						
SAT.						
* (TO NEAREST 1/4 HR.) TOTAL HOURS						