EMPLOYEE NAME		PERIOD ENDING
JOB CODE	TOTAL HOURS WORKED	OT HOURS

LABOR ETC

970.243.0811 • 243.7808 FAX

staffing@laboretc.com

It is understood that the supervisor's signature on this time and attendance sheet is a duly authorized representative of the client and hereby certifies that the indicated hours are true and correct.

LEI employees under the age of 18 will not be allowed to operate, or be in the vicinity of any machinery, trucks, or other automotive equipment. Insurance carried by LEI does not cover claims involving the client's automobiles, trucks, or other types of moveable equipment or vehicles owned, rented or leased, being operated by LEI employees. Said insurance does not cover claims involving pollution damage. The client agrees to accept full responsibility for property damage, bodily injury, fire, theft, collision or public liability damage claims while an LEI employee is performing services for the client or operating the client's owned, rented or leased vehicles.

LEI employees will not be given the responsibility of unattended premises, cash or other valuables.

The client will comply with OSHA, right-to-know laws and state and federal statutes. LEI and LEI employees must be advised immediately of any hazardous materials or situations. The client agrees to provide LEI employees proper training, safety equipment and safe working conditions as required by law.

_____

Supervisor Signature

DAY	DATE	SHIFT IN	*MEAL PERIOD* OUT	*MEAL PERIOD* IN	SHIFT OUT	TOTAL HOURS
SUN						
MON						
TUES						
WED						
THURS						
FRI						
SAT						

I certify that I have worked the hours indicated and that they are true and correct.

_____

Employee Signature