

Employee Name:						
Client Name						
Supervisor						
Unit/Floor:						
Timesheets are due by 12:00 noon every Monday						Company in a second
for the previous week worked	Date	Time In	Time Out	Break	Total Hours	Supervisor Initials
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
				Total Reg.Hours		
				Overtime Hours		
Client Company and Success S conditions on this timesheet.						the terms and
Supervisor's Signature:				Date:		
I, the undersigned, agree to the by my supervisor in order for and without misrepresentation and possible prosecution.	it to be paid by S	uccess Staffing. I	further certify th	at the hours stat	ed in this timesh	eet are correct
Employee Signature:				Date:		

Timesheets can be faxed or emailed to Success Staffing, LLC as follows: (843) 846-4136 (Fax) success.staffing2020@gmail.com (Email)

Terms and Conditions

After interview, client may not directly or indirectly hire the Success contract employee for any position for a period of 90 days for this position with the written consent of management at Success Staffing. Client hereby agrees that if the Client breaches the above terms or Client sells its business to a third party, which breaches the above terms, Client will pay to Success a settlement fee equal to an equitable amount of the contract employees rate of pay. Client shall pay all reasonable attorneys' fees and other costs incurred by Success in enforcing this Agreement. Client shall adhere to all contract payment and provision and by signing this timesheet shall guarantee payment of this timesheet within the terms specified in the client and Success Staffing Contract. No oral statement shall modify or affect the above Terms and Conditions.