

SHOW TOTAL HOURS WORKED  
(ROUNDED TO THE NEAREST 1/4 HOUR)

EMPLOYEE NAME \_\_\_\_\_

Week Ending \_\_\_\_\_

**ANDERSON STAFFING, INC**

Day	Date	Start Time	Lunch Out	Lunch In	End Time	Total Regular Time	Total Over Time
MON							
TUE							
WED							
THURS							
FRI							
SAT							
SUN							
TOTAL (Excluding Lunch)							

Client's Name \_\_\_\_\_

Authorized

Client Signature \_\_\_\_\_

Name and Title \_\_\_\_\_

Employee

Signature \_\_\_\_\_

I certify that the hours shown here are correct and that all work has been performed satisfactorily.

The client understands that the employee is an employee of Anderson Staffing, Inc. and should the client hire the employee, the client is bound by the terms of Anderson Staffing, Inc.'s Schedule of Fees.

California and Federal laws provide an overtime premium for certain hours worked. Accordingly, the client company will be billed for any overtime charges reflected buy this employee time card.

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