



PALMER LEGAL STAFFING

1211 Connecticut Avenue, NW, Suite 302, Washington, DC 20036

Phone 202.464.1000

www.palmerlegalstaffing.com

Firm Name: _____ Address: _____

Temp Name: _____ Week Ending: _____

Please check one box (will default to residence) Send check to office Send check to residence.

Time Sheet

DATE	ARRIVED	LUNCH		DEPARTED	REGULAR HOURS	OVERTIME HOURS
		OUT	IN			

Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

Total Hours		
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Time sheets must be faxed to Palmer Legal Staffing no later than 12:00 noon on the following Monday. Paychecks will be sent by U.S. post on the same day. Please fax time sheets to (703) 904-1891.

I certify that the hours shown were worked by me during the week indicated. I understand Palmer Legal Staffing remains my employer at all times during this assignment and I will receive my wages for hours worked directly from Palmer Legal Staffing.

Employee Signature: _____ Date: _____

I certify that the hours shown were worked by your employee during the week indicated. It is also understood that overtime will be billed at time and a half. We agree not to employ directly the above named temporary for a period of one hundred eighty days (180) from the above date without a release fee to Palmer Legal Staffing.

Authorized Signature: _____ Title: _____ Date: _____