Top Talent. Staffing

210 S Bumby Ave, Suite A • Orlando, FL 32803 Phone (407) 896-2150 • Fax (407) 896-2151



TopTalent Staffing	Pages: Date:							
Fax: (407) 896-2151								
Phone: (407) 896-2150								
Re: Time Card			CC:					
☐ Urgent ☐ For Review ☐	Pleas	e Con	nment 🗆	Please Rep	oly 🗆 Ple	ease Recyc	ele	
CLIENT NAME	EMPLOYE	E NAME						1
ADDRESS:	SOCIAL SECURITY # WEEK ENDING							ı
CITY STATE ZIP		DATE	TIME STARTED	TIME FINISHED	LESS LUNCH	TOTAL HRS		1
We agree that TopTalent has incurred substantial expense in acquiring and maintaining its field staff employees and	MON							
understand that if any TopTaient employee is employed by us, our associates, or affiliates during this assignment or within six months after the assignment, we will pay to TopTaient a conversion fee as specified in the TopTaient	TUE.						ż	ices
We agree that TopTalent has incurred substantial expense in acquiring and maintaining its field staff employees and understand that if any TopTalent employee is employed by us, our associates or affishes during this assignment or within six months after the assignment will pay to TopTalent a conversion fee as specified in the TopTalent Staffing Services Agreement. THE SIGNATURE BELOW CONSTITUTES ACCEPTANCE OF ALL INFORMATION ON THIS TIME TICKET. Authorized Client Signiture. Department or Tide EMPLOYEE. Has assignment been completed? understand that I must contact TopTalent after completing assignment. I certify that no accident or injury was sustained while work.	WED.						TopTalent	Services
	THU.						E S	
Authorized Chent Signature	FRI						O	Staffing
Department or Title	1.43						_ =	li,
EMPLOYEE Has assignment been completed? I understand that I must contact TopTailent after completing assignment.	SAT						1	
I certify that no accident or injury was sustained while working on this assignment	SUN							
Employee.Signature				TOTA	NL HOURS FOR WEEK		_	
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Contact Us At

Phone (407) 896-2150 Fax (407) 896-2151