

CanStaff Employment Services LLC

915 S.E. 9th Avenue • Albany, Oregon 97322
 Phone: 541-497-2163 • Fax: 541-981-2636

TIME SHEET FOR WEEK OF: _____

EMPLOYEE NAME: _____ SSN (Last 4 Digits Only): _____

EMPLOYEE SIGNATURE: _____

DATE	DAY OF WEEK	START TIME	END TIME	LUNCH	TOTAL REG. HOURS	OVER-TIME HOURS	<i>DO NOT WRITE IN THIS COLUMN</i>
	SUN						POSITION TITLE
	MON						
	TUE						PAY RATE:
	WED						BILL RATE:
	THUR						PAY AMOUNT
	FRI						
	SAT						BILL AMOUNT
TOTAL HOURS WORKED							

Is this job assignment completed? Yes No

COMPANY NAME: _____ REPORT TO: _____

ADDRESS: _____ CITY: _____ ZIP: _____

SUPERVISOR SIGNATURE: _____

Note: By signing this client approval, you agree to be bound by the terms of the Temporary Placement Contract.

PLEASE MAIL YOUR TIMESHEETS BY SATURDAY OR FAX THEM TO CANSTAFF EMPLOYMENT SERVICES LLC (541-981-2636) NO LATER THAN 10:00 AM ON MONDAY MORNING.

PAYROLL CHECKS CAN BE PICKED UP BETWEEN 1:00 PM AND 4:00 PM ON FRIDAYS ONLY! CHECKS WILL BE PUT IN THE MAIL AT 4:00 PM! NO EXCEPTIONS!