

Completing Your Time Card:

Please follow these instructions carefully to help us pay you accurately and on time.

- Complete a separate timecard for each assignment.
- Print in capital letters using BLACK or BLUE BALL POINT PEN.
- Complete ALL fields that apply.
- DO NOT cross out blank fields or write any additional information on the timecard.
- Fill in all Daily and Weekly Totals for the days you worked rounding to the nearest 15 minutes. ().
- Sign your timecard.
- Obtain client approval and signature. Remove Client Copy. Give our client the Client Copy. Fax Employer Copy; Retain Employee Copy until payment is received.

(Please make all entries legible to avoid delays in payment for time worked.) Do not hesitate to contact us at anytime at 503.534.3590.

First Name: Last Name: M:

Client Company Name: Work Order #:


Week Ending Sunday Date: Month: Day: Year:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
START	<input type="text" value="8"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="8"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="8"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="8"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="8"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text"/>	<input type="text"/>
LUNCH OUT	<input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="3"/> <input type="text" value="0"/>	<input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text"/>	<input type="text"/>
LUNCH IN	<input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="1"/> <input type="text" value="3"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text"/>	<input type="text"/>
END	<input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="6"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text"/>	<input type="text"/>
OVERTIME	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DAILY TOTALS	<input type="text" value="8"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="8"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="8"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="9"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text" value="8"/> <input type="text" value="0"/> <input type="text" value="0"/>	<input type="text"/>	<input type="text"/>
TOTAL HOURS	<input type="text" value="4"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>						

Certification: We certify that the above hours, including overtime, are correct.
The Client and Employee signatures below includes acceptance of the terms and conditions included herein.

Employee Signature: Sam Smith (I understand and agree to accept all terms and conditions herein)

Client Approval Signature: Judy Rogers (I understand and agree to accept all terms and conditions herein)

 **EMPLOYEE COPY: FAX COPY**

Faxing Your Timecard:

- Fax your timecard at the end of your work week, or not later than Monday at 12:00 p.m.
- Fax the FAX COPY face down with the arrows pointing into the machine.
- DO NOT use or fax your timecard more than once.
- Faxing your timecard allows us to begin processing your payroll immediately.

**A copy must be faxed to Motus Staffing
at 1-800-737-2860 OR (503) 534-3680
by Monday 12:00 PM.**

(Please make all entries legible to avoid delays in payment for time worked.) Do not hesitate to contact us at anytime at 503.534.3590.

First Name: Last Name: MI:

Client Company Name: Work Order #:

Week Ending Sunday Date: Month: Day: Year:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
START	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
LUNCH OUT	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
LUNCH IN	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
END	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
OVERTIME	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
DAILY TOTALS	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
TOTAL HOURS	<input type="text"/> <input type="text"/>						

Certification: We certify that the above hours, including overtime, are correct.

The Client and Employee signatures below includes acceptance of the terms and conditions included herein.

Employee Signature: _____ (I understand and agree to accept all terms and conditions herein)

Client Approval Signature: _____ (I understand and agree to accept all terms and conditions herein)

