



Change for the better

602.263.5100 • fax 602.956.7211
 renaissancepersonnel.com

EMPLOYEE TIME RECORD

Please FAX *signed* copy to 602.956.7211 or EMAIL signed copy to jobs@renaissancepersonnel.com
 Time Cards are due in our offices by 5pm each Friday

Employee: _____ Week Ending Date: _____

Position: _____ Employee Phone #: _____

Client Company: _____

Mail My Paycheck: Paychecks are available Thursdays after 8 am
 Hold My Paycheck for Pickup:

DAY	DATE	MORNING		AFTERNOON		TOTAL HOURS
		TIME IN	TIME OUT	TIME IN	TIME OUT	
MONDAY						
TUESDAY						
WEDNESDAY						
THURSDAY						
FRIDAY						
SATURDAY						
SUNDAY						
TOTAL HOURS						

I (employee) certify that I have worked the number of hours recorded on this time sheet and performed the work during this time period satisfactorily and accident/injury free. I understand Renaissance Personnel Group, Inc. remains my employer at all times during the assignment and I will receive my wages for all hours worked directly from Renaissance Personnel Group, Inc.

EMPLOYEE SIGNATURE: _____ DATE: _____

I (client) certify that the above named employee has satisfactorily worked the hours stated on this time sheet. I further agree to pay, without offset or deduction, Renaissance Personnel Group, Inc.'s invoice for the above services rendered upon receipt thereof. I further agree that if payment in full of the invoice is not received within 14 days of the invoice date, the outstanding balance shall accrue interest at the rate of 1.5% per month until paid. If the above named employee is hired by me or the company I represent within one (1) year of his/her last day of service to the company I represent, I will agree to pay Renaissance Personnel Group, Inc. a placement fee, said amount to be in accordance with the standard fee policy, a copy of which is available upon request and acceptance of above named employee constitutes acceptance as incorporated by reference herein. Acceptance of employee referrals from Renaissance Personnel Group, Inc. constitutes acceptance of the terms of the fee schedule. Further, I (as client) agree to pay all collection costs and attorney's fees incurred by Renaissance Personnel Group, Inc. upon failure to pay any Renaissance Personnel Group, Inc. invoice on or before its due date.

EMPLOYER SIGNATURE: _____ DATE: _____
 PRINT NAME: _____ TITLE: _____