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Earn a bonus: refer a friend to work for TAG.*

ASSOCIATE NAME (PRINT)	CROSS-OUT DAYS NOT WORKED – ROUND TO NEAREST 1/4 HOUR (.25, .50, .75)					
	DAY	DATE	TIME IN	TIME OUT	LESS LUNCH	DAILY TOTAL
	MON					■
	TUES					■
	WED					■
	THU					■
	FRI					■
	SAT					■
	SUN					■
LAST 4 OF SSN						
ASSIGNMENT STATUS: <input type="checkbox"/> CONTINUING <input type="checkbox"/> COMPLETED <input type="checkbox"/> AVAILABLE						
<small>I certify I have worked the hours shown on this time sheet and no accident or injury was sustained while working on the assignment unless noted in the comments section. I have read, understand and agree to the instructions in the Associate Handbook, which can be found at www.ArnoldGroupHR.com/handbook.</small>						
ASSOCIATE SIGNATURE						
CLIENT SUPERVISOR'S INITIALS	TOTAL HOURS WORKED <small>DO NOT INCLUDE LUNCH TIME</small>					

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WEEK ENDING DATE (SUN)			OFFICE NO.
MONTH	DAY	YEAR	

CLIENT COMPANY NAME (PRINT)	DEPARTMENT

CLIENT AUTHORIZATION
<small>I certify the above TAG employee worked the hours shown on this time sheet and agree to the terms and conditions set forth on TAG's signed Staffing Services Rate Agreement.</small>
TAG CLIENT SIGNATURE

GROUP TIME SHEET TOTAL
<small>Write in total hours and fractional hours (.25, .50, .75).</small>
TOTAL HOURS WORKED <small>DO NOT INCLUDE LUNCH TIME</small>