## The Arnold Group <br> A HUMAN RESOURCE COMPANY

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TAGwinfield@the-arnold-group.com

| WEEK ENDING DATE (SUN) |  |  | CLIENT COMPANY NAME (PRINT) |  |
| :---: | :---: | :---: | :---: | :---: |
| MONTH | DAY | YEAR |  |  |
| ASSOCIATE NAME (PRINT) |  |  |  | LAST 4 OF SSN |
| ASSIGNMENT STATUS: $\square$ CONTINUING |  |  | $\square$ COMPLETED | $\square$ AVAILABLE |

I certify | 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.

COMMENTS: $\qquad$

| TAG ASSOCIATE SIGNATURE |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 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 |  |  |  |  |  |
| TOTAL HOURS WORKED <br> DO NOT INCLUDE LUNCH TIME |  |  |  |  | $\square$ |
| ALL FRAUDULENT ACTIVITY WILL BE INVESTIGATED. |  |  |  |  |  |
| CLIENT AUTHORIZATION |  |  |  |  |  |
| ERVISOR NAME (PRINT) PHONE |  |  |  |  |  |
| WRITE IN TOTAL HOURS AND FRACTIONAL HOURS (.25, .50, .75) |  |  |  |  |  |
| ASSOCIATE RETURNING? $\square$ Yes $\square$ No |  |  |  |  |  |

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.

