Name of	f Employee _									~ -			_		
Client										SEMPER, LLC Broadway Place West					
Manager's Name											Godv	vard St. N	IE		
Dept P0 #												s, MN 55	413		
Phone # Ext							Phone: 651-636-5711								
Week Ending Saturday / , 20							_				Fax: 888-836-9703				
Day	Month/ Date		Time In			Time Out		Minus Lunch		Hours Worked			Manager's Initials		
Sun [] .		_							
Mon	/] .		_							
Tue	/] .		_							
Wed	/] .		_							
Thu	/		:] :		_							
Fri	/							_				7 —			
Sat	/		<u> </u>			j .		—				ī			
						-	Total Ho	urs:							
Employee Signature							Total Regular Hours (Up to 40):								
I certify that the hours shown here are correct.							Total Overtime Hours:								
When filli	ing in hours, us	se decimals	s for partial I	nours			Manage	er's Si	ignature						
15 minute and roun	X	I certify to Semper that on behalf of my company, I have the authority to													
	ne Hours								hours & condition rect and I author			t. I have che	cked the		
									a moment						
your contract for specifics.									re and read Ility control						
For Ser		This pas	t week	this employe	e			•	•						
Payment: Paycard		Comple	ent Status: eted	Timecar Send		=		up on t	lime lity was	☐ Yes	ellent	☐ No☐ Good	□ Fair	☐ Poor	
☐ Direct	Deposit	☐ Will co	ntinue	I have enough			attitude was		iii, was			☐ Good		Poor	
-	e the Semper posit form.)	☐ Ending☐ Please						-	work ethic ce this week			☐ Good☐ Good			
 Use a separate timecard for each assignment and for each week's work. Each timecard must be signed by you and your manager at the job site. In order to be paid in a given week, you must fax or deliver a completed, signed timecard to Semper by 10 AM on Monday. Checks will not be released or mailed until this signed timecard is received in our office. To have your check sent to you, be sure to mark the box that says "Mail my check" (above). WE STRONGLY SUGGEST DIRECT DEPOSIT, since we can not be responsible & have no control over timely receipt of mailed checks. ALL CHECKS ARE MAILED FROM BOSTON, MA I also understand that I may from time to time receive emails informing 							Conditions of Employment 1. Before signing this timecard, please make sure that all hours are correct. You will be billed for the hours listed above. 2. All of our employees are paid by Semper. Do not pay our employees directly. 3. Employees may be contacted for employment through Semper only. 4. Supervision, safety and quality control of the employee(s) work is the client's responsibility. 5. You agree to allow our employee to use your fax or fax for the employee. (timecard only) 6. Employee signature is not necessary for billing/payment. 7. Client may not permit or cause our employee to be placed on the payroll of any other firm or client's firm for 12 months after completion of their assignment. In the event the client violates this clause, client will promptly pay Semper as liquidated damages not as a penalty the sum of a minimum of \$5000.00 or 30% of the employees annualized compensation or other payment by client, whichever is greater. 8. Client agrees to notify Semper when assignment is completed or terminated.								
me of add and Affiliat normal an		 Client understands that if within the 1 hour trial period they fail to notify Semper of any complaints the client will be responsible for all monies due for services rendered. Our employees will only work on jobs for which they have been assigned and trained. Any variance must must be reported to our office before work begins. 													