



Integrated Staffing

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[www.integratedstaffingcorp.com](http://www.integratedstaffingcorp.com)

# Weekly Time Sheet With Breaks

Please complete and email to; [TimeSheet@integratedstaffingcorp.com](mailto:TimeSheet@integratedstaffingcorp.com) or  
Fax to 518.499.6402 no later than 10am every Tuesday!

Employee name: \_\_\_\_\_ Week starting: \_\_\_\_\_

Assignment Location: \_\_\_\_\_ Week ending: \_\_\_\_\_

All hours must be reported in Decimal Hours The decimal hours format uses 'base 10' to represent time as common decimal numbers.  
Expressing time in decimal format is essential for payroll because wages must be calculated using standard decimal numbers. For example:  
Converting 30 minutes to decimal time is .5 and converting 15 minutes to decimal time is .25.

Week Day:	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
Date:								
Time In	Total	Total	Total	Total	Total	Total	Total	Total
Time Out								
<i>Meal Break</i>								
Time In	Total	Total	Total	Total	Total	Total	Total	Total
Time Out								Total Hours Scheduled
Total								

Employee signature

Date

Manager signature

Date

I certify that I have worked the hours shown during this week. I understand that the hours I have indicated are true and correct and have not been adjusted once the Manager has signed. I understand that all overtime hours must be authorized by the manager and will not be paid unless the manager has given consent. I certify that I will contact Integrated Staffing Corporation upon completion of my assignment. Failure to contact Integrated Staffing Corporation to request a new assignment will be considered a voluntary resignation and may affect any future unemployment claims. No accident, injury or any other reportable incident occurred while on the job site.

**Manager signature verifies the following:** That manager signature indicates approval of payment of subsequent invoice. That Integrated Staffing Corporation does not cover liability or property damage to client's property, equipment, machinery or automobiles unless prior consent by Integrated Staffing Corporation has been received. That client will pay a temporary to permanent liquidation fee if client transfers an Integrated Staffing Corporation associate to their payroll or to the payroll of any other entity during associates assignment or any time within 6 months of assignment completion unless approved by Integrated Staffing Corporation. That any corrections or audits to the timesheet by be done by Integrated Staffing Corporation to correct any mathematical errors. That by signing this timeslip, that the hours worked are correct and the work/service of the Integrated Staffing Corporation associate was satisfactory. That client has signing authority to sign this timeslip.



