

IMPORTANT: Type or print in ink. Mail original copy to PERRY RESOURCES, 525 Route 73 South, Suite 201, Marlton, N.J. 08053 FAX (856) 596-9125

Employee (please print)						Week ending Sunday			Your Social Security Number														
						Mo	Day	Year															
		AM		PM		TOTAL HOURS				PERRY RESOURCES													
		In	Out	In	Out	HR	MIN					Company Name											
Mon										Address													
Tue.										City and State													
Wed.										Dept. or Division													
Thurs.										<small>Important for Client: Execution of this form by the client constitutes a certification that the TOTAL hours listed are correct as stated - that the work was performed in a satisfactory manner - and agreement by the client to meet payment terms as invoiced. Therefore, in consideration for this service, we agree that if the employee named herein is employed by us within 90 days from the last day worked above we will pay to PERRY RESOURCES the customary permanent fee.</small>													
Fri.												Client Signature											
Sat.																							
Sun.																							
TOTAL WEEKLY HOURS WRITTEN																							
Employee Signature						Total hours worked this week ▲				Be sure to obtain client signature												Thank you!	

I certify that I have worked the days and time shown.

DISTRIBUTION:
White - Perry

Yellow - Employee's copy

Pink - Client's copy

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