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ADDRESS		CITY																																																											
PRINT YOUR NAME		SOCIAL SECURITY NO.																																																											
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**PENN APARTMENT STAFFING**  
 AUSTIN FAX: 512.727.0416  
 DFW FAX: 214.217.5900  
 HOUSTON/SAN ANTONIO FAX: 713.333.3403

DRAW LINE THROUGH DAYS NOT WORKED

FORM PAS - TC5001 REV 10/18

# Employee Information

- Timecards are due EVERY Monday before 10:00 AM.
- We accept faxed or emailed timecards. For reference, always keep a copy of the timecard.
- Timecards must be legible and completely filled out.
- Two signatures are required to have your timecard processed, yours and the property manager's.
- **IT IS YOUR RESPONSIBILITY** to get a signature from the client and turn in your time card in a timely manner.
- Incomplete, unsigned and late timecards will result in receiving your pay at a later date.

## Example Timecard

PROPERTY NAME		SUNDAY END DATE																																																											
ABC Property		1 / 24 / 16																																																											
ADDRESS		CITY																																																											
1212 Yellow Drive		Dallas																																																											
PRINT YOUR NAME		SOCIAL SECURITY NO.																																																											
Jane Doe		1 2 3 4 5 6 7 8 9																																																											
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FORM PAS - TC5001 REV 10/18

### EMPLOYEE INFORMATION

**NEVER CALL THE CLIENT:** IF YOU ARE LATE OR CANNOT WORK THE ASSIGNED HOURS, CALL US. DO NOT CALL THE CLIENT.

**RECORDING YOUR TIME:** RECORD ALL TIME TO THE NEAREST QUARTER HOUR. DO NOT RECORD MINUTES.

**LUNCH:** THE LENGTH OF YOUR LUNCH PERIOD WILL BE DETERMINED BY THE SUPERVISOR AT THE CLIENT TO WHOM YOU ARE ASSIGNED.

**FUTURE ASSIGNMENTS:** YOU MUST CONTACT US UPON THE COMPLETION OF EACH ASSIGNMENT. IF YOU FAIL TO DO SO, WE MAY ASSUME THAT YOU HAVE VOLUNTARILY QUIT WITHOUT GOOD CAUSE ASSOCIATED WITH THE WORK WHICH MAY RESULT IN THE DENIAL OF YOUR UNEMPLOYMENT BENEFITS.

### CLIENT INFORMATION ADDITIONAL TEERMS AND CONDITIONS

Being duly authorized on behalf of Client, the undersigned hereby:

- 1) Acknowledges that the temporary employment service named on the reverse side hereof (the "Service"), incurs substantial recruitment, screening, administrative and marketing expenses in connection with the temporary employee named on the reverse side hereof, and agrees that if the Client hires said employee, Client shall pay to the Service the Placement Fee as set forth on the Fee Schedule for candidates employed by Client. Payment shall be due within ten (10) days of the Service's invoice. If Client employs, directly or indirectly at any location or property owned or managed by Client, any individual submitted by the Service within 180 days of introduction, Client shall pay the fee to the Service.
- 2) Certifies that the hours states above are correct and that the work was performed in a satisfactory manner; and
- 3) Confirms that with respect to the services performed hereunder and any future services that:
  - a) The Client shall not entrust the Service's employees with cash. If said employees are entrusted with negotiables, or other valuables, the Client assumes full responsibility thereof. The Client shall not authorize said employees to operate machinery or motor vehicles without written permission from the Service in each instance. The Service shall not be liable for any unlawful actions, injuries or harm caused by said employees;
  - b) The Service's insurance may not cover loss or damage caused by or arising out of a violation by Client of paragraph (3) (a), above;
  - c) The Service shall not be responsible for claims made under its commercial crime policy unless such claims are reported to it in writing by the Client within thirty (30) days after the occurrence of the claim; and
  - d) The Client shall indemnify and save the Service harmless from all claims and demands arising out of: (1) Client's alleged violation of applicable law, including but not limited to the Occupational Safety and Health Act as it relates to premises owned or controlled by Client and to which the Service's employees are assigned, (2) any alleged negligent or willful act or omission by Client or its personnel causing personal injury to or death of one of Service's employees, or (3) any alleged illegal, discriminatory, negligent or willful act or omission by Client giving rise to allegations of unlawful employment practices by a Service employee assigned to Client. The Client recognizes the Service's employer relationship with said employees, and agrees to notify the Service of all disputes concerning conditions of employment, job assignments or pay procedures prior to taking any action concerning the dispute.
- 4) This agreement is entered into and performable in the State of Texas. In the event enforcement becomes necessary, the venue will be in the courts of Dallas County, Texas.
- 5) **CONCERNS REGARDING EMPLOYMENT CONDITIONS:** if you have any concerns or complaints regarding the conditions of your employment or assignment, including your legal rights to a safe workplace of equal opportunity, you must immediately notify us either in person or by phone at 512-714-3901 (AUS) 972-426-7070 (DFW) or 713-682-0700 (HOU).