



164 Woodstock Ave
Rutland, VT 03766

Time Sheet

SUBMIT TIMESHEET ON OR BEFORE MONDAY AT 10:00AM

EMAIL- rutlandtimecards@leddygroup.com

FAX NUMBER – 1-866-505-7908

TEXT NUMBER – 1-806-464-0213


For Week Ending (Saturday)

Month Day Year

Field Employee

Client Company

Job Site Location / Dept

| DAY | START TIME | OUT | IN | FINISH TIME | TOTAL HOURS |
|---|----------------------|-----|----------------|-------------|-------------|
| SUNDAY | | | | | |
| MONDAY | | | | | |
| TUESDAY | | | | | |
| WEDNESDAY | | | | | |
| THURSDAY | | | | | |
| FRIDAY | | | | | |
| SATURDAY | | | | | |
|  | WEEKLY | | REGULAR HOURS | | |
| | TOTALS | | OVERTIME HOURS | | |
| | TOTAL HOURS FOR WEEK | | | | |

ANY CHANGES/REVISIONS/CROSSOUTS TO THIS TIMECARD ARE REQUIRED TO BE INITIALED BY BOTH PARTIES.

It is hereby certified that the hours listed above are correct and that the work was performed in a satisfactory manner.

Field Employee Signature _____

IS YOUR ASSIGNMENT COMPLETED? _____ NO _____ YES If yes, date completed _____

It is hereby certified that the hours listed above are correct and that the work was performed in a satisfactory manner. I understand that if my company hires a Leddy Group applicant within one hundred eighty (180) days after completion of a supplemental assignment, a full placement fee is required from my company. The above is applicable if an applicant is hired by another department or location of the company.

Client/Company Representative Signature _____

For payroll questions, contact the email above, (603) 749-4504 x732, or your local contact.