



e-STAFF Weekly Time Sheet

Print Name _____

Signature _____

Social Security Number _____

By signing this timesheet, employee certifies no accident or injury was sustained while working on assignment.

e-Staff Consulting Group, Inc.
 600 Davidson Road
 Pittsburgh, PA 15239
 Ph.: 412-798-1660
 Fax: 412 798 0660

Job ID	Su	M	Tu	W	Th	F	Sa
Daily Total							

Saturday Week - Ending Date

Total Regular Hours

Total Overtime Hours

Client Company Name

Client Approval Name (Print)

Client Approval Signature

Client agrees to Hold Harmless Agreement below. Client agrees not to directly or indirectly hire contract employee for a period of 26 weeks beginning from the 1st day of work. Client further agrees not to permit or cause any such contract employee to provide services to Client while on the payroll of any other firm for a period of 90 days following the completion of any assignment without written permission from e-STAFF CONSULTING Group, Inc.

e-STAFF Consulting Group, Inc. Hold Harmless Agreement

Unless the Client has obtained the prior written consent of e-STAFF CONSULTING GROUP, INC. (hereafter referred to as " e-STAFF ") the Client agrees not to ask or allow a contract employee to perform any of the following job related activities:

- a) Driving an automobile or other motor vehicle without having completed and returned to e-STAFF the e-STAFF Driver Release form
- b) Handling cash, securities, or other valuables

If this prior written consent is not obtained, the Client agrees to waive all rights to make a claim against e-STAFF, and to relieve e-STAFF from all liability and responsibility for any damage, loss or expense which the Client incurs as a result of this contract service employee engaging in such activities, and the Client further agrees to indemnify and hold harmless e-STAFF from and against all claims, damages, bodily injuries, losses, and expenses which might be caused as a result of the staffing employee engaging in any of these activities.