

<b>Stephens Little Inc.</b> 5220 Spring Valley Road Suite 100 Dallas, Texas 75254 972/404-1200 FAX: 972/850-3238  Notice to Employee: I certify that the hours shown were worked by me and were properly certified by an authorized representative named below. I understand that I am to contact Stephens Little Inc. after completing the assignment. I agree that if I do not contact the office upon completion of the assignment, they may assume I am not available.	DAY	MON	TUES	WED	THURS	FRI	SAT	SUN
	Month/Day							
	Time In							
	Time Out							
	Less Lunch							
	Total Hours							
	EMPLOYEE NAME (PRINT)	TOTAL HOURS (To the nearest 1/4 hour)		HOURS		MINUTES		WEEK ENDING
EMPLOYEE SIGNATURE	ASSIGNMENT COMPLETED <input type="radio"/> YES <input type="radio"/> NO			<input type="radio"/> MAIL CHECK <input type="radio"/> I WILL PICK UP		<input type="radio"/> DIRECT DEPOSIT		
CLIENT NAME	<b>Client Verification Notice:</b> Client certifies that hours shown are correct; work was done satisfactorily; and client agrees to the terms and conditions as state on this time card. We appreciate your business!							
CLIENT ADDRESS	AUTHORIZED SIGNATURE _____							
DEPT. / SUPERVISOR	DATE _____ AN EQUAL OPPORTUNITY EMPLOYER							

### CLIENT TERMS AND CONDITIONS

Client's signature on this time card indicates acceptance of the following terms and conditions.

Client includes all subsidiaries, affiliates, partners, and subcontractors of the client.

- Client agrees that it will not, without the prior written consent of Stephens Little Inc., authorize or cause an employee of Stephens Little Inc. to operate machinery, automobiles, trucks, or other automotive equipment. Client also accepts full responsibility for claims involving bodily injury, property damage, fire, theft, collision, or public liability damage claims incurred by Stephens Little Inc. employee driving such vehicles.
- Client shall not entrust a Stephens Little Inc. employee with the care of negotiables, securities, or other valuables of any kind without first obtaining permission from Stephens Little Inc. Claims made under our liability insurance must be reported in writing to us by the Client within fifteen (15) days after the occurrence.
- Client agrees to comply with all State and Federal Safety guidelines, including OSHA and agrees to provide a safe and healthful work environment to employees of Stephens Little Inc. Client agrees to defend, indemnify, and hold harmless Stephens Little Inc. for claims, damages or penalties arising out of any violations of OSHA, or any similar state laws with respect to the workplace.
- Client understands that any hours in excess of 40 hours worked by a Stephens Little Inc. employee during a work week will be billed at time and one-half. (Work week begins on Monday and ends on Sunday.)
- Client recognizes there are expense incurred by Stephens Little Inc. to recruit, evaluate, train, and retain its employees. Accordingly, the Client will not, without written permission from Stephens Little Inc., hire an employee of Stephens Little Inc. In the event the Client should desire to hire an employee of Stephens Little Inc., the Client agrees to contact their Stephens Little Inc. representative to be quoted the applicable charges for hiring our employee.
- Client agrees to comply with applicable State and Federal Civil Rights laws, and other employment related laws as they pertain to Stephens Little Inc. employees. Stephens Little Inc. shall incur no liability with regards to any alleged violation of such laws by Client.
- It is understood that Stephens Little Inc. pays its employees weekly and invoices the Client weekly. Terms are: Net Due Upon Receipt. It is understood that unpaid accounts will be considered in default after sixty (60) days, after which time any collection costs incurred, including attorney's fees and litigation costs, will be charged to the Client.