

PAYCHECKS CANNOT BE ISSUED WITHOUT CUSTOMER SIGNATURE

EMPLOYEE

(FIRST) NAME

(LAST)

ARE YOU RETURNING TO THIS ASSIGNMENT

WEEK ENDING DATE (SAT)

YES

NO

RYAN ALTERNATIVE STAFFING INC.

P.O. Box 1919 • Warren, Ohio 44482-1919

(800) 665-5627

TOTAL HOURS WORKED

	SUN	MON	TUES	WED	THUR	FRI	SAT	TOTAL HRS
DATES	/	/	/	/	/	/	/	DO NOT INCLUDE LUNCH
HOURS WORKED								

STRAIGHT TIME	
HRS.	MIN.

OVER TIME	
HRS.	MIN.

Authorized Client Signature includes acceptance of all terms and conditions on reverse side client copy.

EMPLOYEE TERMS AND CONDITIONS

1. Employee agrees not to accept any offer of permanent employment from this Ryan Client without first obtaining written permission from Ryan.
2. Employee agrees not to transfer to the payroll of a different staffing service or leasing company and continue working at any of the existing Ryan clients' locations or facilities without first providing Ryan a 60 day notice.
3. Employee agrees to reimburse Ryan for any overpayment made for any reason due to hours being reported incorrectly.
4. Employee understands that forgery and fraud are criminal offenses and that Ryan will prosecute these matters to the full extent of the law.

EMPLOYEE SIGNATURE

X

CLIENT COMPANY

DIVISION OR DEPT.

AUTHORIZED CLIENT SIGNATURE

DATE

X

Thank you.

We appreciate your business.

EMPLOYEE'S NAME AND ADDRESS (Please Print)

IMPORTANT - if new address, please notify
supervisor immediately.



FIRST
CLASS
POSTAGE
REQUIRED

RYAN ALTERNATIVE STAFFING INC
PO BOX 1919
WARREN OH 44482-1919

184008

JUN 1 8 2009

