



Group Time Card

Toll Free (877) 695-1200

Fax (877) 695-1202

Must be returned Monday by 5 pm EST

CUSTOMER														* CUSTOMER SIGNATURE/TITLE			
JOB SITE														DATES (MONDAY-SUNDAY)			
	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		*EMPLOYEE AUTHORIZATION		
EMPLOYEE NAME & SS #	IN		IN		IN		IN		IN		IN		IN		REGULAR	I have <input type="checkbox"/> /have not <input type="checkbox"/> sustained a work related injury during the cumulative time period reported on this record.	
	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
JOB #	OUT		OUT		OUT		OUT		OUT		OUT		OUT		O.T.	D.T.	Employee Signature
PERDIEM	TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL				
EMPLOYEE NAME & SS #	IN		IN		IN		IN		IN		IN		IN		REGULAR	I have <input type="checkbox"/> /have not <input type="checkbox"/> sustained a work related injury during the cumulative time period reported on this record.	
	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
JOB #	OUT		OUT		OUT		OUT		OUT		OUT		OUT		O.T.	D.T.	Employee Signature
PERDIEM	TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL				
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	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
JOB #	OUT		OUT		OUT		OUT		OUT		OUT		OUT		O.T.	D.T.	Employee Signature
PERDIEM	TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL				
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	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
JOB #	OUT		OUT		OUT		OUT		OUT		OUT		OUT		O.T.	D.T.	Employee Signature
PERDIEM	TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL				
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	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
JOB #	OUT		OUT		OUT		OUT		OUT		OUT		OUT		O.T.	D.T.	Employee Signature
PERDIEM	TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL				
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	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
JOB #	OUT		OUT		OUT		OUT		OUT		OUT		OUT		O.T.	D.T.	Employee Signature
PERDIEM	TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL				
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	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
	LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH		LUNCH				
JOB #	OUT		OUT		OUT		OUT		OUT		OUT		OUT		O.T.	D.T.	Employee Signature
PERDIEM	TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL		TOTAL				

* CUSTOMER & EMPLOYEE AGREE TO TERMS AND CONDITIONS ON REVERSE SIDE

*TOTAL HOURS NEAREST 1/4 HR.