

**STAND-BY PERSONNEL - SKILLED INDUSTRIAL (918) 582-0522**  
**1530 E. 1ST, TULSA, OK 74120**

**EMAIL: SUSANH@STANDBYPERSONNEL.COM**  
**FAX: (918) 584-4990**



**SKILLED INDUSTRIAL PLEASE PRESS HARD WHEN PRINTING**

LAST NAME	INIT.	FIRST NAME
SOCIAL SECURITY NO.		
ADDRESS	CITY	ZIP

**Total Hours Worked**  
 Round to nearest quarter hour.  
**4 HOUR MINIMUM**  
 for each day worker is requested.

CUSTOMER		
ADDRESS		
CITY	STATE	ZIP

STRAIGHT TIME		OVERTIME	
HRS.	MIN.	HRS.	MIN.

REPORT TO
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DATE WORKED	TIME IN	LESS LUNCH	TIME OUT	REG. HRS.	O.T. HRS.	OFFICE USE ONLY
MON						
TUE						
WED						
THUR						
FRI						
SAT						
SUN						

**STAND-BY OFFICE USE**

**CUSTOMER USE**

**CUSTOMER NOTICE:** Your signature below certifies that above hours are correct and work has been done in a satisfactory manner and signifies acceptance of the terms and conditions stated on the reverse side of this card.

CUSTOMER NUMBER	W.C.
P.O.	START TIME
TERRITORY	COORD.
JOB DESCRIPTION	

CUSTOMER SIGNATURE
TITLE

PAY	BILL
REG. HRS.	REG. HRS.
O.T. HRS.	O.T. HRS.
RATE	RATE

Mail Check  Will Pick Up  WEEK ENDING SUNDAY  
 MO DATE YR

Assignment Completed Yes \_\_\_ No \_\_\_ Available for assignments Yes \_\_\_ No \_\_\_

RECEIVED BY	BEGINNING ADVANCE	ENDING ADVANCE	RECEIVED BY
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**TO TEMPORARY EMPLOYEE:** Leave "Customer Copy" with customer. Be sure to fill in your correct mailing address on the back of the original.  
**TO CUSTOMER:** Please document our employee's hours worked and black out the days not worked. If you have any questions, please call our office for clarification.  
**MAIL NO LATER THAN SUNDAY NIGHT**