



818 SW Third Ave #335 Portland Oregon 97204  
 503 281 8900 (Office), Fax 503 961 8910

Processing of your paycheck may be delayed if this card is not filled out completely, and accurately.  
**RETURN TO THE MAINZ BRADY GROUP BY MONDAY NOON**

Employee Name: \_\_\_\_\_

Company Assigned To: \_\_\_\_\_

Assignment Status: Continuing  Finished  Available

Date Worked	Time Started	Lunch In	Lunch Out	Time Finished	Total Regular Hrs	Total OT Hrs**
MON / /						
TUE / /						
WED / /						
THURS / /						
FRI / /						
SAT / /						
SUN / /						
<b>Total Hours Worked This Week</b>					<b>0</b>	<b>0</b>

**\*\* Must be approved by Manager**

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_  
 I approve these hours for payment

Please print name and title \_\_\_\_\_

Employee 's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 I have worked these hours and certify they are correct