



INVOICE

2559 Nursery Rd, #B
 Clearwater, FL 33764
 Phone 866-468-5729

FOR SERVICES PROVIDED BY: _____ Position: _____

AT LOCATION: _____
 FOR WEEK OF: _____

Date	Start Time	End Time for Meal	Start Time after Meal	End Time	Total Hours	GUARANTEE
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
TOTAL:						40

The Reason the Timesheet has LESS THAN THE GUARANTEE is
 PERSONAL TIME OFF () YES () NO

This Agreement includes a **GUARANTEE OF 40 HOURS** which covers ANY reason the center provides less than 40 hours, EXCEPT a request for PERSONAL TIMEOFF (Sick, Personal, Leave, etc).

Rest Breaks. If working in California, Colorado, Kentucky, or Nevada, I attest that I have taken my 10 minute rest break for every 4 hours worked, (Maryland 15 min, Minnesota up to 20 minutes) or as otherwise required under state law.

Meal Breaks. If work is stopped, most states require an unpaid meal break during a work day of 7.5+ hours, enter the start and stop time. If work is reduced, but not stopped, while you take your meal, you may skip to End Time.

Please refer to the Agreement for Temporary Staffing and the Confirmation of Travel Assignment for additional terms and conditions.

Employee signature: _____ Date: _____

Supervisor signature: _____ Date: _____

Please scan and email to: admin@pinnaclestaffingsolutions.org
 Fax to 1-866-373-1481, each Friday by midnight. Thank you!