

EMPLOYEE				Group			
LAST 4 OF SOCIAL				It is the Renhill employee's responsibility to have signed			
SCHOOL DISTRICT				timecards submitted to Renhill by Mondays at 12pm to			
SCHOOL BUILDING				nsure payment on t	ime.		
				Signed timecards may be faxed to 419.254.2917, or scanned & emailed to your primary account manager.			
WEE	K ENDING:						
	DAY	DATE	START TIME	END TIME	LUNCH DEDUCTED	TOTAL HOURS	
	MONDAY						
	TUESDAY						
	WEDNESDAY						
	THURSDAY						
	FRIDAY						
	SATURDAY						
	SUNDAY						
					TOTAL HOURS		
As a Renhill employee, I hereby certify that the hours shown hereon were worked by me during the week ending and were certified by an authorized representative of the above named school/district. I understand that I am to contact Renhill after completing this assignment to discuss another assignment. If I do not do so, Renhill may assume I am not available for work and have voluntarily left their employment. EMPLOYEE SIGNATURE DATE							
LIVIF LOTEL SIGNATURE DATE							
I am an authorized representative of the above named school and/or district. By signing below, I certify that the Renhill employee named above worked the number of hours as itemized and that their work performance was satisfactory. Pursuant to any agreement between Renhill and the above named school/school district, I further understand the above named employee will be paid from this document and the above named school/school district will be invoiced from this document.							

Renhill Group
 2650 N. Reynolds Rd.
 Toledo, OH 43615
 Phone: 419.254.2800
 Fax: 419.254.2917

DATE

SCHOOL SUPERVISOR SIGNATURE