

CLIENT - NAME

TIME RECORD - W 2

CLIENT CONTACT NAME:

PHONE 213-430-0440
Fax 213-430-0445

EMPLOYEE - NAME

ASSIGNMENT COMPLETED

HOLD CHECK FOR PICKUP

I CERTIFY THAT THE HOURS SHOWN ON THIS TIME RECORD ARE ACCURATE AND REFLECT THE TOTAL HOURS I ACTUALLY WORKED FOR THIS CLIENT

SIGNATURE (MANDATORY)

X

| | Date | Start Time | *MEAL Time Out | *MEAL Time In | *MEAL Total Time Taken | End Time | Total Hours .25 = 15 MIN | REGULAR HOURS .25 = 15 MIN | OverTime .25 = 15 MIN | DoubleTime .25 = 15 MIN |
|-------------------------|---|------------|-------------------|-------------------|------------------------|----------------------|-----------------------------|-------------------------------|--------------------------|----------------------------|
| Example | 01/03 | 8:00am | 12:00pm 4:00pm | 12:30pm 5:00pm | 1.50 | 7:00pm | 9.50 | 8 | 1.50 | |
| MONDAY | | | | | | | | | | |
| TUESDAY | | | | | | | | | | |
| WEDNESDAY | | | | | | | | | | |
| THURSDAY | | | | | | | | | | |
| FRIDAY | | | | | | | | | | |
| SATURDAY | | | | | | | | | | |
| SUNDAY Week Ended | | | | | | | | | | |
| Week Ending Date | *If 2 nd Meal Break applicable, record Time Out & In below 1 st Meal Break. Add total time taken in Total Column. | | | | | Weekly Totals | | Regular | OT | DT |

BY EXECUTION OF THIS DOCUMENT, CLIENT AGREES THAT 1) THE HOURS SHOWN ABOVE ARE CORRECT 2) THE WORK PERFORMED WAS SATISFACTORY, AND 3) IF THE A.N.S. TERMS & CONDITION AGREEMENT FOR THIS ASSIGNMENT HAS NOT BEEN SIGNED, CLIENT IS BOUND BY THE TERMS & CONDITIONS BELOW

CLIENT APPROVAL SIGNATURE _____ DATE _____

PRINT NAME _____ TITLE _____

FEES/PAYMENT: INVOICES to Client are DUE UPON RECEIPT because Attorney Network Services ("A.N.S.") invoices represent payroll already paid. A.N.S. may charge late fees if invoices are not paid in a timely manner. Client will reimburse Employee for out of pocket expenditures incurred in the performance of services in accordance with the Client's policies and procedures.

EMPLOYEE SUPERVISION: Client agrees that for all work performed through this assignment (i) Client has sole and exclusive supervision and control over Employee, (ii) Client will provide all reasonably required instructions, directions, work space, supplies, support services, reference materials and computer hardware and software, and (iii) Employee is not authorized, and will not be required, to render written opinions to, or on behalf of, Client or A.N.S., nor are they authorized or will they be required to affix either their names or the names of Client, A.N.S. or any other party to any written legal opinion.

BACKGROUND/QUALIFICATIONS OF EMPLOYEES: Client and Employee are solely responsible for determining the qualification and competency of Employee to perform any work under this assignment. A.N.S. WILL HAVE NO LIABILITY OR OBLIGATION of any kind with respect to the accuracy or completeness of any information furnished by Employee or such Employee's qualifications or competency.

INSURANCE: The insurance provided by A.N.S. does not cover losses, damages or liability caused by the operation of Client's industrial or automotive equipment. A.N.S. will not authorize Employees to operate industrial equipment or automobiles. Client accepts full responsibility for any and all bodily injury, property damage, fire, theft, collision, or public liability damage claims, which may be caused as a result of an Employee operating industrial equipment or driving a vehicle, whether owned or rented, on Client's behalf. No Employee may handle cash or negotiable instruments without the written consent of A.N.S. and then only under Client's direct supervision. A.N.S. will, upon request, provide to Client certificates of insurance or other documentary evidence of the above insurance. A.N.S. HAS NO LIABILITY FOR, AND MAINTAINS NO LEGAL MALPRACTICE INSURANCE COVERING, ACTIONS, ERRORS OR OMISSIONS OF EMPLOYEE AND THAT IT IS THE RESPONSIBILITY OF CLIENT TO OBTAIN WHATEVER INSURANCE IT FINDS NECESSARY.

CONFIDENTIALITY/CONFLICTS OF INTEREST/ETHICAL OBLIGATIONS: Client will not engage Employee where such engagement would cause a conflict of interest, lead to the disclosure of confidential client information or violate any ethical obligations applicable to them. Client also assumes all responsibility for protecting confidential information of its clients. Client will use its best efforts to limit exposure of each Employee to only such files, meetings and other matters as are related to Employee's assignment.

INDEMNIFICATION: Client will indemnify and hold harmless A.N.S. and its directors, officers, employees, related parties and representatives, from, against and in respect of, any and all liabilities, losses, damages, settlements, claims, costs and expenses, including, but not limited to, reasonable attorneys' fees, and any and all actions, suits, proceedings, demands, assessments or judgments, costs and expenses incidental to the foregoing resulting from, or arising out of (a) any breach of this Agreement by Client and (b) any work, action, failure to act or other activity of Employee while engaged by Client, whether such claims are raised by Client, a client of the Client or any other person.

PLACEMENT FEE: If Client, or any of its affiliates, engages Employee, other than through this Agreement, or otherwise employs such Employee in any capacity within ONE YEAR following the termination of Employee's engagement hereunder, Client will pay A.N.S. a placement fee equal (20% for non-attorneys and 30% for attorneys) of Employee's anticipated aggregate compensation (including potential bonuses) for the first twelve months of such employment or engagement. NOT APPLICABLE ON PAYROLL PROCESSING SERVICES.