



Spokane Dental Staffing

(509) 904-7602

spokanedentalstaffing@gmail.com

spokanedentalstaffing.com

Invoice #	
Employee	

Staffing Timecard

Client Information

Office Name:

Responsible Party:

Title:

Billing Email Address:

Preferred Billing Method:

Paperless Mail (Default)

Date	Start Time	Stop Time	Less Lunch	Total Hours
<u>Mon</u>				
<u>Tues</u>				
<u>Weds</u>				
<u>Thur</u>				
<u>Fri</u>				
<u>Sat/Sun</u>				
Weekly Total				

Employees: Please fill out the timecard completely. Have the dentist or office manager sign below and leave a copy with the office (either print or email is okay). Send high-res photos or scans of completed sheets to Spokane Dental Staffing via email. Payroll will be issued when Spokane Dental Staffing receives a **signed** copy of your timecard.

Client Verification

By signing, I verify that the above SDS employee worked the hours listed on the timecard. I agree to the terms and conditions as set forth by the statements listed below (reprinted from client contract):

Client or Responsible Party Signature

Date

- Spokane Dental Staffing, LLC (SDS) will cover all aspects of payroll and mandatory reporting for temporary staff sent to your office.
- Client shall furnish a suitable workplace in compliance with OSHA and other rules and guidelines, and the Client shall

Spokane Dental Staffing Policies

- hold SDS harmless from any violations thereof.
- SDS has a 4 hour daily minimum, billed in 15 minute increments. A max of one unpaid break is permitted for lunch.
- A \$50 fee will be charged for scheduled placements canceled with less than 24 hours notice.

- Payment is due within 30 days of service. Invoices are typically processed within 24 hours. We accept both check and credit cards. If payment is not received within 30 days, a 2% late fee (\$15 dollar minimum) will be charged weekly.