



# UNITED TALENT Medical Staffing

*The Right People, Right Now.*

Payroll Administrator • 500 Leon Sullivan Way • Charleston, WV 25301

Phone: (304) 556-1190 • Fax: (304) 556-1198

Morgantown (304) 225-1199 • Teays Valley (304) 760-1050

To: **PAYROLL ADMINISTRATOR**

Company: **UNITED TALENT MEDICAL STAFFING**

Fax#: **304-556-1198**

Facility \_\_\_\_\_

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

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Soc. Sec # \_\_\_\_\_ Daytime Phone \_\_\_\_\_ Current Work Phone \_\_\_\_\_

Classification:  RN  LPN  CNA  OTHER \_\_\_\_\_

Date Worked: \_\_\_\_\_ Unit/Floor \_\_\_\_\_

Shift:  7am/3pm  3 pm/11pm  11pm/7am  7am-7pm  7pm/7am  Other: \_\_\_\_\_

Circle One: **Monday** **Tuesday** **Wednesday** **Thursday** **Friday** **Saturday** **Sunday**

Time In: \_\_\_\_\_ Time Out: \_\_\_\_\_ Meal: ( 30 Min ) ( 60 Min ) **Yes** **No** ( Circle one )

United Talent is proud to have you as our representative and ask that on your assignment you be prompt, courteous and cooperative. In case of unavoidable delay or absence, please contact United Talent immediately at 556-1190. To receive your pay timely, it is important that you comply with the following:  
(1) Use a separate time sheet for each day and for each unit.  
(2) Time sheets must be signed by an authorized representative of the unit.  
(3) Time sheets must be in the United Talent Charleston office by 12:00 noon Monday or your pay will be delayed one week.  
I certify I have read and understand the above.

\_\_\_\_\_  
Employee Signature

**Completed by Facility: Total Hours Worked: \_\_\_\_\_ Overtime Approved: Yes No**

Signature below constitutes verification of the hours worked by this employee, that the work has been done satisfactorily, and confirms the prior agreement with United Talent. Client understands and acknowledges that United Talent has a significant investment in recruiting, screening, and maintaining a qualified database. Therefore, client agrees, should they hire the above named employee of United Talent, they agree to pay United Talent a service liquidation fee of 25% of the employee's annual salary. Alternately, the employee can remain on United Talent's payroll to complete the required hours for temp-to-hire placement. Client confirms no work ordered, requested, or performed violates federal law or OSHA requirements. Indemnity: In that the client directs all activity of the employee, client agrees to indemnify and hold harmless United Talent for any and all resulting bodily injury or property damage.

\_\_\_\_\_  
Signature of Authorized Client Only  
Revised 1/2011