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**I, , do hereby swear and affirm that I have worked all of the hours and only those hours set forth below as a (Position) at**  **(Location), during the week beginning and that the hours and breaks recorded on this time-card are true accurate.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Day of the Week** (Mon, Tue, Wed, etc.) | **Date** | **Beginning Time** | **Break (duration or start and stop time)** | **Finish Time** | **Total Hours** | **Site/ Location** |
|  |  |  |  |  |  |  |

**Submit to Payroll Dept within 24 hours after shift is completed. Only one shift permitted per timecard.**

Supervisor Name (Printed):

Supervisor Signature: Date:

I certify by my signature that I have worked all of the hours and only the hours stated on this time sheet and that this time sheet is true accurate. I understand that this time sheet is not valid without the signature of my supervisor.

Employee Signature Date

DNA will send weekly invoices to the CONTRACTOR and the CONTRACTOR will pay DNA in accordance with the rates and schedules listed in the Contract. If in the event that payment is not made to DNA within Thirty (30) days after the date of service, the CONTRACTOR will pay interest at the rate of 1.5% per month. If it is necessary to bring legal action to collect the amount owed DNA, the CONTRACTOR will be responsible to reimburse DNA for its responsible attorney’s fees and costs of suit. The CONTRACTOR or any of its affiliates agrees not to hire a DNA employee, either temporarily, full time, or as a consultant within 180 days after the termination of the employee’s assignment with CONTRACTOR. If a DNA employee is hired by the CONTRACTOR or any of its affiliates, the CONTRACTOR agrees to pay a conversion fee of $15,000.00 for an RN, $12,000.00 for an LPN, $9,000.00 for a CNA and $9,000.00 for a HHA. The conversion fee will be reduced by $200.00 for each 40 hours of weekly services performed while on assignment, however in no event will there be any less than a $6,000.00 conversion fee for any position. The same calculation will be used if Contractor converts a DNA employee or agent to a part-time status. Again, the conversion fee will not be less than $6,000.00. The CONTRACTOR has reviewed the Statement of Hours Worked and believes them to be correct and accepts the consultant’s services for the hours stated above and the CONTRACTOR agrees to compensate DNA, for its services pursuant to the contract. Employees must be paid for all time worked. DNA absolutely prohibits off-the-clock work. If meal or other breaks of any duration are interrupted by Contractor’s work duties, Contractor will be billed for the interrupted time so that full payment may be made to the employee. Fully executed timecards, electronic or paper, will be the record of authority in instances where disputes or discrepancies occur pertaining to a meal break. Contractor must provide a full uninterrupted 30-minute meal period. Where meal periods and other breaks are fewer than 20 minutes, DNA will bill Contractor for the entire 20 minutes so that full payment can be made to employee as required by the U.S. Department of Labor, Wage and Hour Division, and all other wage and hour requirements relating to meal and other breaks.

Submit completed timecard to Payroll Dept after each completed shift.

Email: [TravelNursingTimecards@dedicatednurses.com](mailto:TravelNursingTimecards@dedicatednurses.com)

Fax: 844-388-4530