



DYNAMIC DENTAL

STAFFING SOLUTIONS LLC
DENTAL PROFESSIONALS AT THEIR BEST

Fax: (910) 491-3088

Time Sheet

Please complete the information below and read carefully and sign in the space provided.

Dentist Name: _____

Temp Name: _____

Hourly Rate: \$ _____

Total Hours: _____ x Hr Rate _____ \$ _____

Amount Paid \$ _____ Check Number: _____

Please fax this form to (910) 491-3088 at the end of each working day or end of the assignment.

Signature of Temp: _____

In signing the above, I certify the hours worked are accurate and they were verified by the Office Manager or Dentist. Acceptance of employment for this office must be arranged directly by Dynamic Dental Staffing Solutions whether for temporary or permanent.

Date	Time In	Time Out	Time In	Time Out	Total

Client Signature: _____ Title: _____

Client Name: _____

Dental Office: The Dentist Office will pay the Temp employees directly by the end of the day or at the end of the assignment. **Dynamic Dental Staffing Solutions (DDSS)** shall not be liable for malpractice, unemployment, injuries on the job, workers compensation or tax liabilities. **Dynamic Dental Staffing Solutions** is not liable for loss or damage by Temp employees operating dental equipment therefore the Dental Office accepts full responsibility for claims including all costs and fees associated with the defense thereof. The dental office understands that the **Temp employee pay rate is non-negotiable** and that payment must be made directly to them at the end of the work day or end of the assignment. The dental office agrees to pay all collection costs, including attorney fees if the client account is in default and is turned over for collection. If the dental office want to hire a Temp employee of **Dynamic Dental Staffing Solutions**, the dental office will be responsible for a permanent placement fee. The dental office understands that a minimum of **six hours** must be paid to **DDSS**, regardless of the amount of time worked. The dental office understands that they will be responsible for all tax liabilities and workers compensation insurance on that Temp employee.