



WAGE STATEMENT

YOU MUST FILL OUT ONE WAGE STATEMENT PER WEEK

To: Firm: _____

Address: _____

City: _____ Zip: _____

For: Temporary Legal Services of:

Your Employee: _____

Social Security No.-: _____ Employer (not PRS) will need your SS Number

Address: _____

City: _____ Zip: _____

Hours Worked:

Week of: _____ M ___ T ___ W ___ T ___ Fri ___ Sat ___ Sun ___

Total Regular Hours Worked: _____ hours at \$ _____ per hour = \$ _____

Total Overtime Hours Worked

(Over 8 hours /day or 40 hours/week): _____ hours at \$ _____ per hour = \$ _____

TOTAL GROSS AMOUNT DUE TO EMPLOYEE: \$ _____

TOTAL DUE TO REFERRAL SERVICE (15% of gross total due employee) \$ _____

PLEASE INCLUDE A COPY OF THIS WAGE STATEMENT WITH YOUR PAYMENT

Please make checks payable to: Personnel Referral Service, Inc., P.O. Box 515495, Los Angeles, CA 90051. This commission is due at the time the employee is paid.

NOTE: All personnel referred to you on temporary status are NOT EMPLOYEES of PRS and PRS is not responsible for employee taxes, if any. All wages are to be paid directly to the temporary personnel and commission is to be paid separately to PRS. Any tax statement for wages received by that employee is to be mailed directly to the employee.

In the event that you choose to hire a temporary employee on a permanent basis, our permanent placement fee would be due immediately less the commission already contributed on a temporary basis for that employee for the prior six months only. Please call for details: (310) 601-2430.

Facsimile: (310) 601-2431 E-mail: PRS@BHBA.org