

PPSR Inc, dba Labor SMART
118 W Fifth St, FL 2
COVINGTON, KY 41011
Phone: (850) 476-1112
Fax: (850) 476-1113



DATE	INVOICE #
05/19/2017	35-70630

Bill To
Ashley Furniture Turner Furniture Holding Corp PO Box 1427 THOMASVILLE, GA 31799

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	17459	\$77.72	\$77.72

6863 NORTH 9TH AVE

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
249031	05/16/2017	MCBRIDE, SHERWIN	FURNITURE MOVER	Regular Pay	\$13.99	5.50	\$76.95
						5.50	\$76.95

Reg: 5.50 DT:	Invoice #: 35-70630	Sub Total:	\$76.95
OT: Other:	Office #: 35	ACA:	\$0.77
Total Hours: 5.50		Total This Invoice:	\$77.72
		Pay This Amount:	\$77.72

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Bill To
Ashley Furniture Turner Furniture Holding Corp PO Box 1427 THOMASVILLE, GA 31799

SMART abor

WORK ORDER
WWW.LABORSMART.COM

PPSR Inc, dba Labor SMART
 118 W Fifth St, FL 2
 COVINGTON, KY 41011
 Phone: (850) 476-1112
 Fax: (850) 476-1113



DATE	INVOICE #
05/19/2017	35-70631

Bill To
CNA Construction 3169 Midtown Park South MOBILE, AL 36606

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	21858	\$632.00	\$632.00

312 E. NINE MILE

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
248917	05/15/2017	WILKINS, JUSTIN	GENERAL LABOR	Regular Pay	\$13.99	8.00	\$111.92
249093	05/16/2017	BITTNER, JON	SEMI-SKILLED	Regular Pay	\$15.25	8.00	\$122.00
249033	05/16/2017	WILKINS, JUSTIN	GENERAL LABOR	Regular Pay	\$13.99	8.00	\$111.92
249167	05/18/2017	BITTNER, JON	SKILLED	Regular Pay	\$17.50	8.00	\$140.00
249224	05/18/2017	HAYNES, CALVIN	GENERAL LABOR	Regular Pay	\$13.99	5.00	\$69.95
249224	05/18/2017	NELSON, DEMETRIUS	GENERAL LABOR	Regular Pay	\$13.99	5.00	\$69.95
						42.00	\$625.74

Reg: 42.00 DT:	Invoice #: 35-70631	Sub Total:	\$625.74
OT: Other:	Office #: 35	ACA:	\$6.26
Total Hours: 42.00		Total This Invoice:	\$632.00
		Pay This Amount:	\$632.00

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Bill To
CNA Construction 3169 Midtown Park South MOBILE, AL 36606

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THANK YOU FOR YOUR BUSINESS

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WORK ORDER WWW.LABORSMART.COM

ORDER #	CUSTOMER NAME:	DATE:	TIME:	# OF WORKERS:
240003	CHA CONSTRUCTION	5/18/2017	08:00 AM	
ASSIGNMENT TITLE: 21858	312 E Nine Mile	ASSIGNMENT ADDRESS: 312 E Nine Mile Rd. PENSAKOLA, FL 32514		
REPORT TO: CONTACT PHONE # Main 721) 445-8318 Cell 721) 445-8318	Comments Josh			
EMPLOYEE NAME Wittner, Jon	PO #	HOURS (Must Mark one)	PARTIAL HOURS (Must Mark one)	
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ORDER # 249007	CUSTOMER NAME: GTA Construction	DATE: 05/17/2017	TIME: 05:00 AM	# OF WORKERS:
ASSIGNMENT TITLE: 21858 312 E Nine Mile	ASSIGNMENT ADDRESS: 312 E Nine Mile Rd PENNSYLVANIA 15264			
REPORT TO: John	COMMENTS			
CONTACT PHONE # Main Cell 724) 445-8318	PO # 5/17/2017 3:37:29 024	HOURS (Must Mark one)		
EMPLOYEE NAME	PO #	PARTIAL HOURS (Must Mark one)	Time:	
Birther Jon	Stain - Glass	<input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input checked="" type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input 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**SMART
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WORK ORDER
WWW.LABORSMART.COM

NOTICE:		MINIMUM 4 HOURS PER PERSON			
ORDER # 245524	CUSTOMER NAME: CHN Construction	DATE: 05/18/2017	TIME: 06:00 AM	# OF WORKERS: 2	
ASSIGNMENT ADDRESS: 312 E. Nine Mile Rd. PENSACOLA FL 32514					
REPORT TO: Josh	COMMENTS				
CONTACT PHONE # Main 251-445-8318 Cell 251-445-8318	5/18/2017 8:31:07 AM				
		PO #	HOURS (Must Mark one)	PARTIAL HOURS (Must Mark one)	
			<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input checked="" type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16	<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16	
			<input type="radio"/> General Labor <input checked="" type="radio"/> General Foreman <input type="radio"/> Superintendent <input type="radio"/> Project Manager <input type="radio"/> Other _____	# of Workers: _____	
				PRINT NAME AND TITLE _____	
				AUTHORIZED SIGNATURE _____	
				by signing you agree to the terms and conditions set forth on the back of this document	

THANK YOU FOR YOUR BUSINESS

White: Customer Copy Blue & Canary: Return to Labor Smart

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WORK ORDER

www.laborsmart.com

ORDER #	CUSTOMER NAME:	DATE:	TIME:	# OF WORKERS:																	
ASSIGNMENT TITLE:	05/18/12	7:00	3																		
REPORT TO:	Comments:																				
CONTACT PHONE #	Main Cell																				
EMPLOYEE NAME	PO #	HOURS (Must Mark one)		PARTIAL HOURS (Must Mark one)																	
<i>John</i>		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
<i>Calvin</i>		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
<i>Deneious</i>		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
<i>Deneious Michael</i>		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/2	1/4	1/2

NOTICE: MINIMUM 4 HOURS PER PERSON	
Do you need workers to return? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Date:	Time:
# of Workers: <i>Tosh</i>	

THANK YOU FOR YOUR BUSINESS

White - Customer Name

Blue & Canary: Return to Labor Smart

Tosh
AUTHORIZED SIGNATURE
by signing you agree to the terms and conditions
set forth on the back of this document

PPSR IIc, dba Labor SMART
 118 W Fifth St, FL 2
 COVINGTON, KY 41011
 Phone: (850) 476-1112
 Fax: (850) 476-1113



DATE	INVOICE #
05/19/2017	35-70632

Bill To
Horizon Home Services 1257 W Nine Mile Road PENSACOLA, FL 32534

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	30419	\$357.60	\$357.60

1257 W NINE MILE ROAD

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
248819	05/09/2017	KIMBROUGH, JODY	SEMI	Regular Pay	\$17.50	4.00	\$70.00

1705 GNARLY OAKS CIRCLE

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
249144	05/17/2017	WILKINS, JUSTIN	HELPER	Regular Pay	\$14.95	7.00	\$104.65
249144	05/18/2017	WILKINS, JUSTIN	HELPER	Regular Pay	\$14.95	8.00	\$119.60
249144	05/19/2017	WILKINS, JUSTIN	HELPER	Regular Pay	\$14.95	4.00	\$59.80

Reg: 23.00 DT:	Invoice #: 35-70632	Sub Total:	\$354.05
OT: Other:	Office #: 35	ACA:	\$3.55
Total Hours: 23.00		Total This Invoice:	\$357.60
		Pay This Amount:	\$357.60

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Bill To
Horizon Home Services 1257 W Nine Mile Road PENSACOLA, FL 32534

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THANK YOU FOR YOUR BUSINESS

White: Customer Copy

Blue & Canary: Return to Labor Smart

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WORK ORDER
WWW.LABORSMART.COM

ORDER #	CUSTOMER NAME:	DATE:	TIME:	# OF WORKERS:																	
ASSIGNMENT/TITLE: REPORT TO:	Hilton Home Services 1705 COMMENTS Circle	ASSIGNMENT ADDRESS: 1257 W Nine Mile Road PENSACOLA, FL 32534	05/17/2017	08:00 AM																	
CONTACT PHONE # Main Cell	(850) 969-0697	5/17/2017 7:34:57 AM	HOURS (Must Mark one)																		
EMPLOYEE NAME	PO #	PARTIAL HOURS (Must Mark one)																			
Wilkins, Justin 5/17		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
Wilkins, Justin 5/18	Helper	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
Wilkins, Justin 5/19	Helper	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	1/4

NOTICE: MINIMUM 4 HOURS PER PERSON	
F/F DO YOU NEED WORKERS TO RETURN?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Date:	5-22-17
Time:	8 AM
F/F	PPSR Inc. dba Labor Smart (850) 476-1112 (850) 476-1113

THANK YOU FOR YOUR BUSINESS

White: Customer Conv Blue & Canary: Return to Labor Smart

by signing you agree to the terms and conditions
set forth on the back of this document

John Franklin
John Franklin
AUTHORIZED SIGNATURE

PPSR llc, dba Labor SMART
 118 W Fifth St, FL 2
 COVINGTON, KY 41011
 Phone: (850) 476-1112
 Fax: (850) 476-1113



DATE	INVOICE #
05/19/2017	35-70633

Bill To
Horizon Retail Construction, Inc. 1500 Horizon Drive STURTEVANT, WI 53177

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	37494	\$2639.57	\$2639.57

VICTORIA SECRET

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
248649	05/13/2017	BITTNER, JON	HELPER	Regular Pay	\$14.32	8.00	\$114.56
248649	05/13/2017	DIXON, ROBERT	HELPER	Regular Pay	\$14.32	8.00	\$114.56
248649	05/13/2017	HUDSON, GREGORY	HELPER	Regular Pay	\$14.32	8.00	\$114.56
248649	05/13/2017	WHINEGLASS, WILLIAM	HELPER	Regular Pay	\$14.32	8.00	\$114.56
248650	05/15/2017	BITTNER, JON	HELPER	Regular Pay	\$14.32	9.00	\$128.88
248650	05/15/2017	DIXON, ROBERT	HELPER	Regular Pay	\$14.32	9.00	\$128.88
248650	05/15/2017	HUDSON, GREGORY	HELPER	Regular Pay	\$14.32	9.00	\$128.88
248651	05/16/2017	BITTNER, JON	HELPER	Regular Pay	\$14.32	9.00	\$128.88
248651	05/16/2017	DIXON, ROBERT	HELPER	Regular Pay	\$14.32	9.00	\$128.88
248651	05/16/2017	HUDSON, GREGORY	HELPER	Regular Pay	\$14.32	9.00	\$128.88
249045	05/16/2017	WHINEGLASS, WILLIAM	HELPER	Regular Pay	\$14.32	9.00	\$128.88
249092	05/17/2017	DIXON, ROBERT	HELPER	Regular Pay	\$14.32	9.00	\$128.88
249092	05/17/2017	WHINEGLASS, WILLIAM	HELPER	Regular Pay	\$14.32	9.00	\$128.88
249160	05/18/2017	DIXON, ROBERT	HELPER	Regular Pay	\$14.32	5.00	\$71.60
249160	05/18/2017	DIXON, ROBERT	HELPER	Overtime Pay	\$21.48	3.00	\$64.44
249160	05/18/2017	WHINEGLASS, WILLIAM	HELPER	Regular Pay	\$14.32	8.00	\$114.56
249235	05/19/2017	BITTNER, JON	HELPER	Overtime Pay	\$21.48	10.00	\$214.80
249239	05/19/2017	DIXON, ROBERT	HELPER	Overtime Pay	\$21.48	10.00	\$214.80
249235	05/19/2017	HUDSON, GREGORY	HELPER	Regular Pay	\$14.32	10.00	\$143.20
249239	05/19/2017	WHINEGLASS, WILLIAM	HELPER	Regular Pay	\$14.32	6.00	\$85.92
249239	05/19/2017	WHINEGLASS, WILLIAM	HELPER	Overtime Pay	\$21.48	4.00	\$85.92
						169.00	\$2613.40

PPSR Inc, dba Labor SMART
118 W Fifth St, FL 2
COVINGTON, KY 41011
Phone: (850) 476-1112
Fax: (850) 476-1113



DATE	INVOICE #
05/19/2017	35-70633

Bill To
Horizon Retail Construction, Inc. 1500 Horizon Drive STURTEVANT, WI 53177

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	37494	\$2639.57	\$2639.57

Reg: 142.00 DT:	Invoice #: 35-70633	Sub Total:	\$2613.40
OT: 27.00 Other:	Office #: 35	ACA:	\$26.17
Total Hours: 169.00		Total This Invoice:	\$2639.57
Pay This Amount:			\$2639.57

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Bill To
Horizon Retail Construction, Inc. 1500 Horizon Drive STURTEVANT, WI 53177

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White: Customer Survey

Blue & Canary: Behavior to Iahor Smart

SUGAR IN SUGAR

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WORK ORDER
WWW.LABORSMART.COM

ORDER # 246050	CUSTOMER NAME: Holzman Retail Construction Inc.	DATE: 5/15/2017	TIME: 05:00 AM	# OF WORKERS: 3
ASSIGNMENT TITLE: 37484 Victoria Secret	ASSIGNMENT ADDRESS: Cardoya Mall Brent, FL 32503			
REPORT TO: Jill	COMMENTS -off			
CONTACT PHONE # Main 267) 638-6000 Cell:	PO # 5/15/2017 6:00 AM			

NOTICE: MINIMUM 4 HOURS PER PERSON	
FPPSIC, dba Labor Smart Phone: (850) 476-1112 Fax: (850) 476-1113	
Do you need workers to return? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Date: <u>5/15/2017</u>	Time: <u>05:00 AM</u>

EMPLOYEE NAME	PO #	HOURS (Must Mark one)	PARTIAL HOURS (Must Mark one)
Bittner, Jill	5/15/2017	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	④
Brooks, Robert	Holdings	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱
MacLean, Gregory	Holdings	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱
		① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱
		① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱
		① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱
		① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱
		① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱
		① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱
		① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱
		① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱

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White: Customer Copy

Blue & Canary: Return to Labor Smart

Randy Black
PRINT NAME AND TITLE
AUTHORIZED SIGNATURE
by signing you agree to the terms and conditions
set forth on the back of this document

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WORK ORDER

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ORDER # 248651	CUSTOMER NAME: Horizon Residential Construction Inc.	DATE: 05/18/2017	TIME: 06:00 AM	# OF WORKERS: 4																		
ASSIGNMENT TITLE: 37494 Victoria Secret	ASSIGNMENT ADDRESS: Cordova Mall Brent, FL 32603																					
REPORT TO: JG	COMMENTS																					
CONTACT PHONE # Main 267-638-6000 Cell	5/15/2017 11:13:11 PM																					
EMPLOYEE NAME	PO #	HOURS (Must Mark one)		PARTIAL HOURS (Must Mark one)																		
Nixon, Robert	Helper	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9	<input type="radio"/> 10	<input type="radio"/> 11	<input type="radio"/> 12	<input type="radio"/> 13	<input type="radio"/> 14	<input type="radio"/> 15	<input type="radio"/> 16	<input type="radio"/> 17	<input type="radio"/> 18	<input type="radio"/> 19	<input type="radio"/> 20	<input type="radio"/> 21	<input type="radio"/> 22
Bittner, Jon	Helper	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9	<input type="radio"/> 10	<input type="radio"/> 11	<input type="radio"/> 12	<input type="radio"/> 13	<input type="radio"/> 14	<input type="radio"/> 15	<input type="radio"/> 16	<input type="radio"/> 17	<input type="radio"/> 18	<input type="radio"/> 19	<input type="radio"/> 20	<input type="radio"/> 21
Hudson, Gregory	Helper	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9	<input type="radio"/> 10	<input type="radio"/> 11	<input type="radio"/> 12	<input type="radio"/> 13	<input type="radio"/> 14	<input type="radio"/> 15	<input type="radio"/> 16	<input type="radio"/> 17	<input type="radio"/> 18	<input type="radio"/> 19	<input type="radio"/> 20	<input type="radio"/> 21
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NOTICE:	
MINIMUM 4 HOURS PER PERSON	
FPSR Inc., dba Labor Smart	Phone: (860) 478-1112
Fax: (860) 478-1113	
Do you need workers to return?	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Date: 5/17/17	Time: 9:00 AM
# of Workers: 2	
PRINT NAME AND TITLE Randy Black	
AUTHORIZED SIGNATURE Randy Black	
by signing you agree to the terms and conditions set forth on the back of this document	

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WORK ORDER
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NOTICE:		MINIMUM 4 HOURS PER PERSON		
ORDER #: <u>74045</u>	CUSTOMER NAME: <u>Hansen's Retail Contribution Inc.</u>	DATE: <u>05/14/2017</u>	TIME: <u>06:00 AM</u>	# OF WORKERS: <u>1</u>
ASSIGNMENT TITLE: <u>37994 Victoria Secret</u>	COMMENT: <u></u>			
REPORT TO: <u>100 Main Cell 2621 638-6000</u>	CONTACT PHONE #: <u></u>	PO # <u>141161</u>	HOURS (Must Mark one) <u>1</u> <input type="radio"/> <u>2</u> <input type="radio"/> <u>3</u> <input type="radio"/> <u>4</u> <input type="radio"/> <u>5</u> <input type="radio"/> <u>6</u> <input type="radio"/> <u>7</u> <input type="radio"/> <u>8</u> <input checked="" type="radio"/> <u>9</u> <input type="radio"/> <u>10</u> <input type="radio"/> <u>11</u> <input type="radio"/> <u>12</u> <input type="radio"/> <u>13</u> <input type="radio"/> <u>14</u> <input type="radio"/> <u>15</u> <input type="radio"/> <u>16</u>	PARTIAL HOURS (Must Mark one) <u>0</u> <input type="radio"/> <u>1/2</u> <input type="radio"/> <u>1/4</u> <input type="radio"/> <u>1/3</u> <input type="radio"/> <u>1/6</u>
			Date: <u>05/15/2017</u>	Time: <u>2:27:23 PM</u>
			Date: <u>05/15/2017</u>	Time: <u>2:27:23 PM</u>
			# of Workers: <u>1</u>	
			PRINT NAME AND TITLE <u>Randy Black</u>	
			<u>5442K</u>	
			<u>Randy Black</u>	
			AUTHORIZED SIGNATURE <u>Randy Black</u>	
			by signing you agree to the terms and conditions set forth on the back of this document	

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By Peter Cody

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NOTICE: MINIMUM 4 HOURS PER PERSON			
ORDER # <u>20160</u>	CUSTOMER NAME: <u>Hansen Residential Construction Inc.</u>	DATE: <u>05/18/2017</u>	TIME: <u>07:00 AM</u>
ASSIGNMENT TITLE: <u>31294 Victoria Secret</u>	ASSIGNMENT ADDRESS: <u>Coronova Mall, 801 32500</u>	# OF WORKERS: <u>2</u>	
REPORT TO: <u>Jd@</u>	COMMENTS		
CONTACT PHONE # <u>Main Cell (627) 638-6000</u>	PO # <u>5/17/2017 3:05:12 PM</u>	HOURS (Must Mark one)	
EMPLOYEE NAME	PO #	PARTIAL HOURS (Must Mark one)	
<u>1800, Robert</u>	<u>big 1 page</u>	<input type="checkbox"/> 1	<input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input checked="" type="checkbox"/> 7 <input checked="" type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19 <input type="checkbox"/> 20 <input type="checkbox"/> 21 <input type="checkbox"/> 22 <input type="checkbox"/> 23 <input type="checkbox"/> 24 <input type="checkbox"/> 25 <input type="checkbox"/> 26 <input type="checkbox"/> 27 <input type="checkbox"/> 28 <input type="checkbox"/> 29 <input type="checkbox"/> 30 <input type="checkbox"/> 31 <input type="checkbox"/> 32 <input type="checkbox"/> 33 <input type="checkbox"/> 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THANK YOU FOR YOUR BUSINESS

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SMART
labor

WORK ORDER
WWW.LABORSMART.COM

White: Customer Copy Blue & Canary: Return to Labor Smart

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WWW.LABORSMART.COM

THANK YOU FOR YOUR BUSINESS

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Blue & Canary Return to Lahor Smart

PPSR Inc, dba Labor SMART
118 W Fifth St, FL 2
COVINGTON, KY 41011
Phone: (850) 476-1112
Fax: (850) 476-1113



DATE	INVOICE #
05/19/2017	35-70634

Bill To
ParsCo Construction P.O. Box 12862 PENSACOLA, FL 32501

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	29950	\$87.65	\$87.65

714 N DEVILLERS

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
249035	05/16/2017	DAVIS, DERRICK	DIGGER/HELPER	Regular Pay	\$13.35	6.50	\$86.78
						6.50	\$86.78

Reg: 6.50 DT:	Invoice #: 35-70634	Sub Total:	\$86.78
OT: Other:	Office #: 35	ACA:	\$0.87
Total Hours: 6.50		Total This Invoice:	\$87.65
		Pay This Amount:	\$87.65

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Bill To
ParsCo Construction P.O. Box 12862 PENSACOLA, FL 32501

SMART
labor

WORK ORDER
WWW.LABORSMART.COM

NOTICE:		MINIMUM 4 HOURS PER PERSON				
ORDER #	CUSTOMER NAME:	DATE:	TIME:	# OF WORKERS:		
240035	Parco Construction	05/16/2017	06:00 AM	1		
ASSIGNMENT TITLE:	ASSIGNMENT ADDRESS:					
20050	714 N Devillers	Box 12862 BENACOCA, FL 32501				
REPORT TO:	COMMENTS					
CONTACT PHONE #:	Main Cell (305) 696 7645	5/16/2017 6:47:44 AM				
		PO #	HOURS (Must Mark one)	PARTIAL HOURS (Must Mark one)		
Davis, Derrick		Digger/ helper	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯			
		# of Workers:	1			
		Date:	05/16/2017			
		Time:	2:15 PM			
		Mark Smith AP				
		PRINT NAME AND TITLE				
		<i>[Signature]</i>				
		AUTHORIZED SIGNATURE by signing you agree to the terms and conditions set forth on the back of this document				

White: Customer Copy Blue & Canary: Return to Labor Smart

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by signing you agree to the terms and conditions
set forth on the back of this document

YARD & CO BUSINESS

PPSR llc, dba Labor SMART
 118 W Fifth St, FL 2
 COVINGTON, KY 41011
 Phone: (850) 476-1112
 Fax: (850) 476-1113



DATE	INVOICE #
05/19/2017	35-70635

Bill To
Pinckard Garage Doors 5489 Woodbine Road PACE, FL 32571

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	24619	\$269.65	\$269.65

PINKARD GARAGE DOOR

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
248963	05/16/2017	FLANAGAN, ALAN	GENERAL LABOR	Regular Pay	\$13.35	4.00	\$53.40
248963	05/16/2017	GREGORY, WAYLON	GENERAL LABOR	Regular Pay	\$13.35	4.00	\$53.40
248963	05/16/2017	HAYNES, CALVIN	GENERAL LABOR	Regular Pay	\$13.35	4.00	\$53.40
248963	05/16/2017	JONES, KERRY	GENERAL LABOR	Regular Pay	\$13.35	4.00	\$53.40
248963	05/16/2017	STANLEY, LIONEL	GENERAL LABOR	Regular Pay	\$13.35	4.00	\$53.40
					20.00		\$267.00

Reg: 20.00 DT:	Invoice #: 35-70635	Sub Total:	\$267.00
OT: Other:	Office #: 35	ACA:	\$2.65
Total Hours: 20.00		Total This Invoice:	\$269.65
		Pay This Amount:	\$269.65

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Bill To
Pinckard Garage Doors 5489 Woodbine Road PACE, FL 32571

labor|SMART

WORK ORDER
www.laborsmart.com

ORDER # 246043	CUSTOMER NAME: Pinhard Garbage Dots	DATE: 05/10/2017	TIME: 06:00 AM	# OF WORKERS: 5
ASSIGNMENT TITLE: 246043 Pinhard Garbage Doty	ASSIGNMENT ADDRESS: 5489 Woodbine Road Paxton, IL 60953			
REPORT TO: Karen	COMMENTS			
CONTACT PHONE # Main Cell (844) 994-7701	5/15/2017 6:31:26 AM			

EMPLOYEE NAME	PO #	HOURS (Must Mark one)	PARTIAL HOURS (Must Mark one)												
			1	2	3	4	5	6	7	8	9	10	11	12	13
James Galvin	General Laborer	(1) <input type="checkbox"/> (2) <input type="checkbox"/> (3) <input checked="" type="checkbox"/> (4) <input type="checkbox"/> (5) <input type="checkbox"/>	(6) <input type="checkbox"/> (7) <input type="checkbox"/> (8) <input type="checkbox"/> (9) <input type="checkbox"/> (10) <input type="checkbox"/> (11) <input type="checkbox"/> (12) <input type="checkbox"/> (13) <input type="checkbox"/> (14) <input type="checkbox"/> (15) <input type="checkbox"/> (16) <input type="checkbox"/>	<input type="checkbox"/>											
James, Kevney	General Laborer	(1) <input type="checkbox"/> (2) <input type="checkbox"/> (3) <input checked="" type="checkbox"/> (4) <input type="checkbox"/> (5) <input type="checkbox"/> (6) <input type="checkbox"/> (7) <input type="checkbox"/> (8) <input type="checkbox"/> (9) <input type="checkbox"/> (10) <input type="checkbox"/> (11) <input type="checkbox"/> (12) <input type="checkbox"/> (13) <input type="checkbox"/> (14) <input type="checkbox"/> (15) <input type="checkbox"/> (16) <input type="checkbox"/>	<input type="checkbox"/>												
Lemongrass, Karen	General Laborer	(1) <input type="checkbox"/> (2) <input type="checkbox"/> (3) <input checked="" type="checkbox"/> (4) <input type="checkbox"/> (5) <input type="checkbox"/> (6) <input type="checkbox"/> (7) <input type="checkbox"/> (8) <input type="checkbox"/> (9) <input type="checkbox"/> (10) <input type="checkbox"/> (11) <input type="checkbox"/> (12) <input type="checkbox"/> (13) <input type="checkbox"/> (14) <input type="checkbox"/> (15) <input type="checkbox"/> (16) <input type="checkbox"/>	<input type="checkbox"/>												
Legory, EYION	General Laborer	(1) <input type="checkbox"/> (2) <input type="checkbox"/> (3) <input checked="" type="checkbox"/> (4) <input type="checkbox"/> (5) <input type="checkbox"/> (6) <input type="checkbox"/> (7) <input type="checkbox"/> (8) <input type="checkbox"/> (9) <input type="checkbox"/> (10) <input type="checkbox"/> (11) <input type="checkbox"/> (12) <input type="checkbox"/> (13) <input type="checkbox"/> (14) <input type="checkbox"/> (15) <input type="checkbox"/> (16) <input type="checkbox"/>	<input type="checkbox"/>												
STANLEY, LITCHFIELD	General Laborer	(1) <input type="checkbox"/> (2) <input type="checkbox"/> (3) <input checked="" type="checkbox"/> (4) <input type="checkbox"/> (5) <input type="checkbox"/> (6) <input type="checkbox"/> (7) <input type="checkbox"/> (8) <input type="checkbox"/> (9) <input type="checkbox"/> (10) <input type="checkbox"/> (11) <input type="checkbox"/> (12) <input type="checkbox"/> (13) <input type="checkbox"/> (14) <input type="checkbox"/> (15) <input type="checkbox"/> (16) <input type="checkbox"/>	<input type="checkbox"/>												
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NOTICE: MINIMUM 4 HOURS PER PERSON	
PPSR Inc, dba Labor Smart	Phone: (850) 476-1112.
Part # (850) 476-1113	Part # (850) 476-1114
Do you need workers to return?	
<input type="checkbox"/> YES	<input type="checkbox"/> NO
Date: _____	Time: _____
# of Workers: _____	
PRINT NAME AND TITLE <i>Keith</i>	
AUTHORIZED SIGNATURE by signing you agree to the terms and conditions set forth on the back of this document	

THANK YOU FOR YOUR BUSINESS

White: Customer Copy

Blue & Canary: Return to Labor Smart

PPSR Inc, dba Labor SMART
 118 W Fifth St, FL 2
 COVINGTON, KY 41011
 Phone: (850) 476-1112
 Fax: (850) 476-1113



DATE	INVOICE #
05/19/2017	35-70636

Bill To
Rockwell Construction Vance 3130 King St BELLVIEW, FL 32526

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	37498	\$420.16	\$420.16

DUKE

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
248932	05/15/2017	MACK, ANTHONY	SEMI-SKILL	Regular Pay	\$16.00	9.00	\$144.00
249048	05/16/2017	MACK, ANTHONY	SEMI-SKILL	Regular Pay	\$16.00	10.00	\$160.00
249149	05/18/2017	COFFIN, LOUIS	SEMI-SKILL	Regular Pay	\$16.00	7.00	\$112.00
							26.00 \$416.00

Reg: 26.00 DT:	Invoice #: 35-70636	Sub Total:	\$416.00
OT: Other:	Office #: 35	ACA:	\$4.16
Total Hours: 26.00		Total This Invoice:	\$420.16
		Pay This Amount:	\$420.16

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Bill To
Rockwell Construction Vance 3130 King St BELLVIEW, FL 32526

labor | SMART

WORK ORDER

www.laborsmart.com

ORDER #	CUSTOMER NAME:	DATE:	TIME:	# OF WORKERS:													
100002	Rochester Construction	05/16/2017	07:00 AM														
ASSIGNMENT TITLE:	Assignment Address:																
17498 Duke	3213 Duke Dr BETTUCE, FL 32563																
REPORT TO:	COMMENTS																
White Canary																	
CONTACT PHONE #	Main Cell: (407) 394-1100	5/15/2017-5/16/2017 AM															
EMPLOYEE NAME	PO #	HOURS (Must Mark one)		PARTIAL HOURS (Must Mark one)													
White Canary		<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input checked="" type="radio"/> 9	<input type="radio"/> 10	<input type="radio"/> 11	<input type="radio"/> 12	<input type="radio"/> 13	<input type="radio"/> 14	<input type="radio"/> 15	<input type="radio"/> 16	
		<input type="radio"/> 0	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9	<input type="radio"/> 10	<input type="radio"/> 11	<input type="radio"/> 12	<input type="radio"/> 13	<input type="radio"/> 14	<input type="radio"/> 15
		<input type="radio"/> 1/2	<input type="radio"/> 1/3	<input type="radio"/> 1/4	<input type="radio"/> 1/5	<input type="radio"/> 1/6	<input type="radio"/> 1/7	<input type="radio"/> 1/8	<input type="radio"/> 1/9	<input type="radio"/> 1/10	<input type="radio"/> 1/11	<input type="radio"/> 1/12	<input type="radio"/> 1/13	<input type="radio"/> 1/14	<input type="radio"/> 1/15	<input type="radio"/> 1/16	<input type="radio"/> 1/17
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NOTICE:	
MINIMUM 4 HOURS PER PERSON	
Phone: (888) 476-1112	Phone: (888) 476-1113
Do you need workers to return?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
Date: <u>5/16/16</u>	Time: <u>7:20</u>
# of Workers: <u>1</u>	
PRINT NAME AND TITLE	
<u>White Canary</u>	
AUTHORIZED SIGNATURE	
by signing you agree to the terms and conditions set forth on the back of this document	

THANK YOU FOR YOUR BUSINESS

White: Customer Copy Blue & Canary: Return to Labor Smart

labor|SMART

WORK ORDER

WWW.LABORSMART.COM

ORDER # 249048	CUSTOMER NAME: Rockwell Construction	DATE: 05/10/2017	TIME: 07:00 AM	# OF WORKERS: 1
ASSIGNMENT TITLE: 37408 Duke	ASSIGNMENT ADDRESS: 3213 Duke Dr., Gulf Breeze, FL 32563			
REPORT TO: Vance	COMMENTS			
CONTACT PHONE # Main (850) 291-8100	5/15/2017 3:46:29 PM			

NOTICE: MINIMUM 4 HOURS PER PERSON	
PPSR Inc., dba Labor Smart	Phone: (850) 476-1112
	Fax: (850) 476-1113
Do you need workers to return? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Date: <u>5-17-17</u>	Time: <u>7:30</u>
# of Workers: <u>1</u>	
PRINT NAME AND TITLE <i>Vance Bokhour</i>	
AUTHORIZED SIGNATURE by signing you agree to the terms and conditions set forth on the back of this document	

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WORK ORDER
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WORK ORDER
WWW.LABORSMART.COM

ORDER #	CUSTOMER NAME: Rockwell Construction	DATE: 05/16/17	TIME: 6:00pm	# OF WORKERS: 1
ASSIGNMENT TITLE:	ASSIGNMENT ADDRESS: 4013 Duke Dr. Kingsport, TN 37623			
REPORT TO: Vance Rockwell	COMMENTS 3013 Duke Dr.			
CONTACT PHONE # Main _____ Cell _____				
EMPLOYEE NAME	PO #	HOURS (Must Mark one)	PARTIAL HOURS (Must Mark one)	
John Caffon - Sem. Shift	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	Date: <i>Vance Rockwell</i> Time: _____
	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	# of Workers: <i>Vance Rockwell</i>
	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	PRINT NAME AND TITLE <i>Vance Rockwell</i>
	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	AUTHORIZED SIGNATURE by signing you agree to the terms and conditions set forth on the back of this document
	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	
	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯	

THANK YOU FOR YOUR BUSINESS

White: Customer Copy Blue & Canary: Return to Labor Smart

PPSR IIc, dba Labor SMART
 118 W Fifth St, FL 2
 COVINGTON, KY 41011
 Phone: (850) 476-1112
 Fax: (850) 476-1113



DATE	INVOICE #
05/19/2017	35-70637

Bill To
SAULSBERRY CONSTRUCTION, EXCAVATION & HAULING, LLC Ernest Saulsberry 7377 Rolling Hills Rd PENSACOLA, FL 32505

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	37565	\$653.35	\$653.35

OFFICE

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
249083	~05/16/2017	JONES, SHERMAN	EQUIPMENT OPERATOR	Regular Pay	\$17.25	7.00	\$120.75
249150	~05/18/2017	JONES, SHERMAN	EQUIPMENT OPERATOR	Regular Pay	\$17.25	7.00	\$120.75
249150	~05/18/2017	STOKES, CHARLES	EQUIPMENT OPERATOR	Regular Pay	\$17.25	7.50	\$129.38
249292	~05/19/2017	JONES, SHERMAN	EQUIPMENT OPERATOR	Regular Pay	\$17.25	7.00	\$120.75
249292	~05/19/2017	STOKES, CHARLES	EQUIPMENT OPERATOR	Regular Pay	\$17.25	9.00	\$155.25
						37.50	\$646.88

Reg: 37.50 DT:	Invoice #: 35-70637	Sub Total:	\$646.88
OT: Other:	Office #: 35	ACA:	\$6.47
Total Hours: 37.50		Total This Invoice:	\$653.35
		Pay This Amount:	\$653.35

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Bill To
SAULSBERRY CONSTRUCTION, EXCAVATION & HAULING, LLC Ernest Saulsberry 7377 Rolling Hills Rd PENSACOLA, FL 32505

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WORK ORDER

WWW.LABORSMART.COM

ORDER #	CUSTOMER NAME:		DATE:	TIME:	# OF WORKERS:																												
ASSIGNMENT/TITLE:	SAULBERRY CONSTRUCTION		10/18/2017	06:00 AM	1																												
REPORT TO:	ADDRESS: 7377 Rolling Hills Rd PENSACOLA, FL 32506																																
CONTACT PHONE #	Comments																																
Main	37505 0110																																
Cell	(404) 521-0225																																
EMPLOYEE NAME		PO #	HOURS (Must Mark one)		PARTIAL HOURS (Must Mark one)																												
Saulberry Construction			<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9	<input type="radio"/> 10	<input type="radio"/> 11	<input type="radio"/> 12	<input type="radio"/> 13	<input type="radio"/> 14	<input type="radio"/> 15	<input type="radio"/> 16	<input type="radio"/> 17	<input type="radio"/> 18	<input type="radio"/> 19	<input type="radio"/> 20	<input type="radio"/> 21	<input type="radio"/> 22	<input type="radio"/> 23	<input type="radio"/> 24	<input type="radio"/> 25	<input type="radio"/> 26	<input type="radio"/> 27	<input type="radio"/> 28	<input type="radio"/> 29	<input type="radio"/> 30	<input type="radio"/> 31	
Main			<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9	<input type="radio"/> 10	<input type="radio"/> 11	<input type="radio"/> 12	<input type="radio"/> 13	<input type="radio"/> 14	<input type="radio"/> 15	<input type="radio"/> 16	<input type="radio"/> 17	<input type="radio"/> 18	<input type="radio"/> 19	<input type="radio"/> 20	<input type="radio"/> 21	<input type="radio"/> 22	<input type="radio"/> 23	<input type="radio"/> 24	<input type="radio"/> 25	<input type="radio"/> 26	<input type="radio"/> 27	<input type="radio"/> 28	<input type="radio"/> 29	<input type="radio"/> 30	<input type="radio"/> 31
Cell			<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9	<input type="radio"/> 10	<input type="radio"/> 11	<input type="radio"/> 12	<input type="radio"/> 13	<input type="radio"/> 14	<input type="radio"/> 15	<input type="radio"/> 16	<input type="radio"/> 17	<input type="radio"/> 18	<input type="radio"/> 19	<input type="radio"/> 20	<input type="radio"/> 21	<input type="radio"/> 22	<input type="radio"/> 23	<input type="radio"/> 24	<input type="radio"/> 25	<input type="radio"/> 26	<input type="radio"/> 27	<input type="radio"/> 28	<input type="radio"/> 29	<input type="radio"/> 30	<input type="radio"/> 31
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WORK ORDER

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ORDER # 249150	CUSTOMER NAME: SAILSBERRY CONSTRUCTION EXCAVATION & HAUL	DATE: 05/18/2017	TIME: 08:00 AM	# OF WORKERS: 2
ASSIGNMENT TITLE: 37055 office	ASSIGNMENT ADDRESS: 7377 Rolling Hills Rd PENNSAUGET, PA 18444			
REPORT TO: Emmett	COMMENTS			
CONTACT PHONE # Mobile 572-1025 Cell	5/18/2017 7:36:24 AM			
EMPLOYEE NAME	PO #	HOURS (Must Mark one)		PARTIAL HOURS (Must Mark one)
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WORK ORDER
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ORDER #	CUSTOMER NAME:	DATE:	TIME:	# OF WORKERS:
741282	SAUSSERRY CONSTRUCTION	10/10/2017	08:00 AM	2
ASSIGNMENT TITLE:	ASSIGNMENT ADDRESS:			
37565 Office	1377 Bellin Hills Rd Fenton, MI 48430			
REPORT TO:	COMMENTS			
Ernest				
CONTACT PHONE #				
Main Cell (248) 572-1025	5/19/2017 7:14:43 AM			
EMPLOYEE NAME	PO #	HOURS (Must Mark one)		PARTIAL HOURS (Must Mark one)
Loses, Sherman	Equipment Operator	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 0 <input type="radio"/> 1/2 <input type="radio"/> 1/4 <input type="radio"/>	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 0 <input type="radio"/> 1/2 <input type="radio"/> 1/4 <input type="radio"/>	
Holmes, Charles	Equipment Operator	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 0 <input type="radio"/> 1/2 <input type="radio"/> 1/4 <input type="radio"/>	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 0 <input type="radio"/> 1/2 <input type="radio"/> 1/4 <input type="radio"/>	
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PPSR IIc, dba Labor SMART
 118 W Fifth St, FL 2
 COVINGTON, KY 41011
 Phone: (850) 476-1112
 Fax: (850) 476-1113



DATE	INVOICE #
05/19/2017	35-70638

Bill To
Troendle Hardwood Floor Company Lisa 4905 North Davis Hwy Pensacola FL BRENT, FL 32503

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	17442	\$309.75	\$309.75

OFFICE

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
249030	✓05/16/2017	NELSON, DEMETRIUS	HELPER	Regular Pay	\$14.96	4.00	\$59.84
249154	✓05/18/2017	HUDSON, GREGORY	HELPER	Regular Pay	\$14.96	8.00	\$119.68
249153	✓05/19/2017	DAVIS, DERRICK	HELPER	Regular Pay	\$14.96	8.50	\$127.16
						20.50	\$306.68

Reg: 20.50 DT:	Invoice #: 35-70638	Sub Total:	\$306.68
OT: Other:	Office #: 35	ACA:	\$3.07
Total Hours: 20.50		Total This Invoice:	\$309.75
		Pay This Amount:	\$309.75

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Bill To
Troendle Hardwood Floor Company Lisa 4905 North Davis Hwy Pensacola FL BRENT, FL 32503

labor | SMART

WORK ORDER
WWW.LABORSMART.COM

ORDER # 246153	CUSTOMER NAME: Trendle Hardwood Floor Company	DATE: 05/19/2017	TIME: 06:00 AM	# OF WORKERS: 1
ASSIGNMENT TITLE: 1442 Office	ASSIGNMENT ADDRESS: 1905 North Dennis Hwy Pensacola FL 32503			
REPORT TO: Lisa	COMMENTS			
CONTACT PHONE # Main (850) 478-5328 Cell	5/19/2017 5:18:30 PM			

EMPLOYEE NAME Derrick Davis, Helper	PO #	HOURS (Must Mark one)												PARTIAL HOURS (Must Mark one) Time: _____ # of Workers: _____							
		1	2	3	4	5	6	7	8	9	10	11	12		13	14	15	16			
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	3/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	3/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	3/4
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		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	3/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	3/4
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	0	1/4	1/2	3/4
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NOTICE:	
MINIMUM 4 HOURS	
PER PERSON	
PPSF Inc., dba Labor Smart	
Phone: (850) 476-1112	
Fax: (850) 476-1113	
Do you need workers to return?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
Date: _____	Time: _____

THANK YOU FOR YOUR BUSINESS

White: Customer Copy Blue & Canary: Return to Labor Smart

AUTHORIZED SIGNATURE
by signing you agree to the terms and conditions set forth on the back of this document

labor | **SMART**

WORK ORDER
WWW.LABORSMART.COM

ORDER #	CUSTOMER NAME NO ENDIE HARDWOOD	DATE: 5-14-17	TIME: 8:00 AM	# OF WORKERS: 1
ASSIGNMENT TITLE:	ASSIGNMENT ADDRESS: 11605 Abute Drive Hwy Pensacola, FL 32503			
REPORT TO: KBA	COMMENTS			
CONTACT PHONE # Main Cell				
EMPLOYEE NAME	PO #	HOURS (Must Mark one)		PARTIAL HOURS (Must Mark one)
DEME TRIUS DIAZ		<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 0
		<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 1
		<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 2
		<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 3
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		<input type="radio"/> 11	<input type="radio"/> 12	<input type="radio"/> 5
		<input type="radio"/> 13	<input type="radio"/> 14	<input type="radio"/> 6
		<input type="radio"/> 15	<input type="radio"/> 16	<input type="radio"/> 7
		<input type="radio"/> 17	<input type="radio"/> 18	<input type="radio"/> 8
		<input type="radio"/> 19	<input type="radio"/> 20	<input type="radio"/> 9
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WORK ORDER
WWW.LABORSMART.COM

ORDER # 240030	CUSTOMER NAME: Troendle Hardwood Floor Company	DATE: 5/16/2017	TIME: 08:00 AM	# OF WORKERS: 1
ASSIGNMENT TITLE: Office	ASSIGNMENT ADDRESS: 1905 North 32nd Hwy Pensacola FL OPEN 12503			
REPORT TO: Lisa	COMMENTS			
CONTACT PHONE # Main(850) 478-5328 Cell	5/16/2017 8:25:32 AM			
EMPLOYEE NAME	PO #	HOURS (Must Mark one)	PARTIAL HOURS (Must Mark one)	
Heaton, Dennis	Project	<input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 0 <input type="radio"/> 1/2 <input type="radio"/> 1/4 <input type="radio"/> 1/8 <input type="radio"/> 1/16		
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ORDER #	CUSTOMER NAME: <i>Wendy Hinkel</i>		DATE: <i>05/16/17</i>	TIME: <i>7:30</i>	# OF WORKERS: <i>1</i>
ASSIGNMENT TITLE:	ASSIGNMENT ADDRESS: <i>3501 N Davis Hwy</i>				
REPORT TO: <i>Linda</i>	COMMENTS				
CONTACT PHONE #	Main	Cell			
EMPLOYEE NAME	PO #	HOURS (Must Mark one)	PARTIAL HOURS (Must Mark one)		
<i>Craig M. Nelson</i>		<input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input checked="" type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input checked="" type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 17 <input type="radio"/> 18 <input type="radio"/> 19 <input type="radio"/> 20 <input type="radio"/> 21 <input type="radio"/> 22 <input type="radio"/> 23 <input type="radio"/> 24 <input type="radio"/> 25 <input type="radio"/> 26 <input type="radio"/> 27 <input type="radio"/> 28 <input type="radio"/> 29 <input type="radio"/> 30 <input type="radio"/> 31 <input type="radio"/> 32 <input type="radio"/> 33 <input type="radio"/> 34 <input type="radio"/> 35 <input type="radio"/> 36 <input type="radio"/> 37 <input type="radio"/> 38 <input type="radio"/> 39 <input type="radio"/> 40 <input type="radio"/> 41 <input 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PPSR IIC, dba Labor SMART
 118 W Fifth St, FL 2
 COVINGTON, KY 41011
 Phone: (850) 476-1112
 Fax: (850) 476-1113



DATE	INVOICE #
05/15/2017	35-70598

Bill To
Sherry Hart Sherry 86 Chantecaille Circle GULF BREEZE, FL 32561

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Terms	Customer #	Amount	Balance Due
NET 7	37588	\$125.24	\$125.24

OFFICE

Order #	Date	Name	Position	Item	Bill Rate	Bill Hours	Amount
249032	05/15/2017	GULLEY , KEAYNON	LANDSCAPE	Regular Pay	\$15.50	4.00	\$62.00
249032	05/15/2017	ROBINSON , GERALD	LANDSCAPE	Regular Pay	\$15.50	4.00	\$62.00
						8.00	\$124.00

Reg: 8.00 DT:	Invoice #: 35-70598	Sub Total:	\$124.00
OT: Other:	Office #: 35	ACA:	\$1.24
Total Hours: 8.00		Total This Invoice:	\$125.24
		Pay This Amount:	\$125.24

Please Remit Payment To
Transfac Capital, Inc PO BOX 3238 SALT LAKE CITY, UT 84110 Phone: (850) 476-1112

Bill To
Sherry Hart Sherry 86 Chantecaille Circle GULF BREEZE, FL 32561

labor | **SMART**

WORK ORDER
WWW.LABORSMART.COM

ORDER # 240032	CUSTOMER NAME: Sherry Hart	DATE: 05/15/2017	TIME: 02:00 PM	# OF WORKERS: 2																	
ASSIGNMENT TITLE: Landscaping	ASSIGNMENT ADDRESS: 80 Charterware Circle Glen Burnie, MD 21061	PPSR Lic. #86 Labor Smart Phone: (410) 478-1112 (410) 478-1113																			
REPORT TO: Sherry	COMMENTS	<p>PW</p> 																			
CONTACT PHONE # Main Cell: 410-729-6588	5/15/2017 1:48:48 PM																				
EMPLOYEE NAME	PO #	HOURS (Must Mark One)		PARTIAL HOURS (Must Mark One)																	
Quiley, Keaydon		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	D	H	H	H
Johnson, Gerald		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	D	H	H	H
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	D	H	H	H
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THANK YOU FOR YOUR BUSINESS

White: Customer Copy

Blue & Canary: Return to Labor Smart

NOTICE:
**MINIMUM 4 HOURS
PER PERSON**
PPSR Lic. #86 Labor Smart
Phone: (410) 478-1112
(410) 478-1113

Do you need
workers to return?
 YES NO
Date: _____
Time: _____
of Workers: _____

PRINT NAME AND TITLE

AUTHORIZED SIGNATURE
by signing you agree to the terms and conditions
set forth on the back of this document