

CLIENT ORDER FORM

Employee Name

state date

Job Title

approx end date

Job Type (drop down list)

RECRUITER INFORMATION

Address

Your name

City State Zip

company name

COMPANY INFORMATION

split recruiter 1

Working at...

split recruiter 2

Supervisor name

email

Supervisor dept.

Rate information...

Company name

Company bill rate _____

Address

less employee pay rate _____

City, state zip

less payroll burden(% of pay rate)

Phone _____ fax _____

Send invoice to _____

Less MCG fee ___% of bill rate

Contract name _____

Recruiter profit _____

Contact dept

Overtime exempt yes ___ no ___

Company name- address-city state zip

Overtime bill rate _____
(typically 1.5 times the regular rate)

Phone _____ fax _____

Credit information - years in business _____
Done business previously with them? _____

Industry/business type _____ Size of company (employees) _____ Large national or intl
co _____

Mid-size local _____ Small local company _____

Confident in their ability to pay timely?