



TIME SHEET

NAME OF TEMPORARY WORKER:							
WEEK COMMENCING:							
COMPANY:				LOCATION:			
DAY	DATE	START TIME	FINISH TIME	TOTAL HOURS	OVER TIME	LESS BREAKS	CHARGEABLE HOURS
SUNDAY							
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							
TOTAL							

I certify that the hours claimed above were worked

.....
Temporary Worker's Name: PRINTED

.....
Temporary Worker's Signature

I confirm that the hours claimed above were worked satisfactorily and will be the basis for payment of the Temporary Worker and Invoice to ourselves.

.....
Signed for and on behalf of the Client

.....
Date

.....
Order Number (where applicable)

PLEASE TOTAL YOUR HOURS, ROUNDING TO THE NEAREST QUARTER OF AN HOUR AND FAX BACK TO COMMERCIAL RECRUITMENT 01242 702250 or SCAN AND EMAIL sarah@commercialrecruitment.co.uk BY FRIDAY P.M. AT THE LATEST. THANK YOU.