

TIMESHEET



Temp Name:	Week Ending:
Client:	Card ID No:
Client Address:	

IMPORTANT NOTE: Timesheets Submission Deadline Monday 10am

Please ensure that this timesheet is completed IN FULL and either sent to the Timesheet WhatsApp group, or emailed to jobs@lucyjames.uk Please ensure that all alterations are countersigned and note that if there are queries on any sections then payment may be delayed. Please make sure that the week ending date and the Client name are accurately and clearly printed.

Vehicle:	Registration:
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	Time Started	Signature	Finish Time	Signature	Total Hours
Mon					
Tue					
Wed					
Thu					
Fri					
Sat					
Sun					
		Number of Nights Out		Weeks Total	

I confirm and agree that the total hours listed above, including overtime hours, have been satisfactorily worked and that payment in respect of these will be made according to your current terms of business which I have received from you and accept as the basis of this transaction.

Client Name:	Position:	Signature:	Date:
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Temp's Name:	Signature:	Date:
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