

Timesheet

Temp's Name:	Week Commencing:
Company Name:	Timesheet No.
Company Address:	

IMPORTANT PLEASE NOTE : Timesheets received after **10:30am on a Monday** may not be included in the payroll that week. Please ensure that this timesheet is completed **IN FULL** and emailed through to: admin@diverse-recruitment.co.uk Alternatively please drop it into the post box next to the main entrance to Coney Green Business Centre, Clay Cross.

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 both your name and the company name are accurately and clearly printed.

	Shift	Start Time	Finish Time	Total Breaks (In Mins)	A Total Hours Worked	B Total Hours Standard	C Total O/T Hours	Expenses Incurred
Mon								
Tue								
Wed								
Thur								
Fri								
Sat								
Sun								
TOTAL HOURS WORKED = The Total of Columns B and C should equal column A								

Clients please confirm:

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 (Please Print):	Client Position:	Signature:	Date:
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Temp's Name:	Signature:	Date:
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