

details of hours

Contractor Name:

Mobile Number:

Client Company:

Office Use Only:

Date	Day	Start Time	Finish Time	Less Breaks (in hrs)	Total Hours Worked
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				

NORMAL HOURS:

Date	Day	Start Time	Finish Time	Less Breaks (in hrs)	Total Hours Worked
	Monday				
	Tuesday				
	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				

NORMAL HOURS:

CLIENT: I hereby confirm that the hours stated on this timesheet are correct and the work has been satisfactorily completed to standard. I authorise Peopleconnexion Recruitment to invoice at the agreed rates for the payable hours above.

Client Signature:

Name: (please print)

CANDIDATE: Please ensure that your timesheet is SCANNED to kristine@peopleconnexion.com by Monday 10am and that it is completed and signed by the authorised representative of the client.

Contractor Signature:

Name: (please print)

contractor timesheet

