TIMESHEET

NAME:	AUTHORISED BY:	WEEK ENDING:
SIGNATURE:	STAND BY (Tick if applicable): YES ☐	** Site Allowance MUST also be noted on Daily Log/Job Sheet. Site Allowance will not be paid until Daily Log/Job Sheet is received.

DATE:	JOB LOCATION / DETAILS:	VEHICLE REG.NO.	START TIME:	FINISH TIME:	BREAKS:	TOTAL HOURS:	O/T MEAL PROVIDED? YES/NO	**SITE ALLOW. HR/$:	OFFICE USE ONLY ORD. HRS	O/T @ DOUBLE TIME	RDO
WED:	1.										
	2.										
	3.										
THURS:	1.										
	2.										
	3.										
FRI:	1.										
	2.										
	3.										
SAT:	1.										
	2.										
	3.										
SUN:	1.										
	2.										
	3.										
MON:	1.										
	2.										
	3.										
TUES:	1.										
	2.										
	3.										
					TOTAL HOURS:						

OFFICE USE ONLY

ORDINARY HOURS:		O/T DOUBLE TIME:		PUBLIC HOLIDAY:		ANNUAL LEAVE:		PERSONAL (SICK) LEAVE:	
RDO:		STANDBY:		TRAVEL ALLOWANCE:		MEAL ALLOW:		SITE ALLOW:	