

WORK RECORD/TIME SHEET

One to One Personnel

Week Ending

Please ensure that your timesheet is returned by 9am Monday morning. Late timesheets will delay payment of wages.

Name	Payroll No.
Client	
Address	
Report To	Client No
Ordered By	P/O No

Please remember to detail main breaks. Incorrect hours may not be rectifiable.

	Mon	Tue	Wed	Thurs	Fri	Sat	Sun	
Start								
Finish								
Break Start Time								
Break Finish								
Start								
Finish								
Basic Hours								TOTAL
O/Time Hours								

It is hereby certified that the hours shown are correct, excluding all main breaks and that the work was carried out satisfactorily in accordance with the prevailing terms and conditions.

Client Signature _____ Name _____

Position in Company _____ Date _____

OFFICE USE ONLY

	PAY RATES	PAY HOURS	BILL HOURS	BILL RATES
BASIC	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
OT 1	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>
OT 2	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>	<input style="width: 50px; height: 20px;" type="text"/>