



WEEKLY TIMESHEET

Employee Full Name	<u>OFFICE USE ONLY</u>
	WEEK NUMBER

DAY	DATE	LOCATION	START	FINISH	BREAK	DAILY TOTAL HOURS	AUTHORISED SIGNATURE
MON							
TUES							
WED							
THUR							
FRI							
SAT							
SUN							
PRINT NAME		SIGNATURE			DATE		
							WEEKLY TOTAL HOURS

CLIENT SIGNATORY: BY SIGNING THE TIMESHEET YOU ARE CONFIRMING THAT YOU ARE AN AUTHORISED SIGNATORY AND AGREE THAT THE HOURS WORKED ARE CORRECT TO INVOICE.

PLEASE NOTE. IT IS YOUR RESPONSIBILITY TO ENSURE THAT YOUR TIMESHEET IS SIGNED AND SUBMITTED TO RELIANT RECRUITMENT LIMITED OFFICE BY NO LATER THAN 11AM ON THE MONDAY. FAILURE TO DO SO MAY DELAY YOUR PAY.