

winners! recruitment

8 Old Bridge Street, Truro TR1 2AQ

Tel 01872 264744 Fax 01872 264745

Time sheet

Name of worker: _____

Job title: _____

Name of client: _____ Tel: _____

Address: _____

Reporting to: _____

Week ending: _____

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Start							
Lunch							
Finish							
Total							

Total hours: _____

To be completed by client, please ensure that the time sheet is fully completed before signing.
I/We agree that the hours shown above are correct and that the work completed was satisfactory.

Signed by: _____

Print name: _____

Position in company: _____ Date: _____

Time sheets must be with us by 10am the following Monday either by post, fax or e-mail.

We value our relationships

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