

**Please ensure that your Time Sheet is returned to our office before 6pm Friday**.

**Email your consultant directly with the approved timesheet.**

**Time Sheet**

**Name:**

**Company:**

**Address:**

**Consultant:**

# **Week Beginning:** **Week Ending:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Day** | **Start** **Time** | **Lunch** **Time** | **Finish** **Time** | **Overtime****Hours** | **Total****Normal Hours** | **Total** **Overtime Hours** |
| **Mon** |  |  |  |  |  |  |
| **Tue** |  |  |  |  |  |  |
| **Wed** |  |  |  |  |  |  |
| **Thur** |  |  |  |  |  |  |
| **Fri** |  |  |  |  |  |  |
| **Sat** |  |  |  |  |  |  |
| **Sun** |  |  |  |  |  |  |
| **Total** |  |  |  |  |  |  |

Please tick if you require the following: P45 Request [ ] Holiday Pay [ ]

**Your time sheet must be signed by you and your supervisor before you return it to us.**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Client Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_