



Week ending date:

Payroll number:

Name of temporary worker:

Job title:

Company name:

Reports to:

	TIME	FROM	TO	TOTAL
<b>Monday</b>	am lunch pm			
<b>Tuesday</b>	am lunch pm			
<b>Wednesday</b>	am lunch pm			
<b>Thursday</b>	am lunch pm			
<b>Friday</b>	am lunch pm			
<b>Saturday</b>	am lunch pm			
<b>Sunday</b>	am lunch pm			
Total hours worked to the nearest quarter hour excluding lunch breaks				
Total hours to the nearest quarter hour in words				
Twenty two and a half hours.				

I confirm the temporary worker named above worked the hours stated.

**Client signature:**.....

**Date Signed:** .....

**Name (in capitals):** .....

1. Please complete hours on a daily basis, deduct time off for lunch breaks
2. Before working overtime, please ensure written authorisation is obtained by the client
3. Please return your timesheet by 9.30am on the Monday following the week worked
4. An authorised representative of the client must sign the timesheet confirming all hours worked

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