

Temporary and Contract Assignments Timesheet

Name of temp: _____

Company name & address: _____

Nature of assignment: _____

Week ending date: _____

TIMESHEET DEADLINE 5PM MONDAY

Please fax or email a scanned copy of this timesheet to:
0207 569 9388 or payroll@handle.co.uk

If you miss this deadline you will not be included in that
weeks payroll.

Timesheets can be downloaded from the Candidate
Section of our website.

Please calculate hours to the nearest 1/4 hr worked excluding breaks - **PLEASE USE BLACK INK WHEN COMPLETING**

	Time started	Time finished	Time taken for breaks	Total hours worked
Mon				
Tue				
Wed				
Thu				
Fri				
Sat/Sun				

Total hours this week _____

Client:

I confirm that the above hours have been satisfactorily worked
and that payment in respect thereof will be made according to
your terms of business, which I have received from you and
accept as the basis of this transaction.

Company Name: _____

Your Name and Title (printed): _____

Signature: _____

Date: _____

Temporary worker:

Ensure that all your hours are approved and the timesheet is
signed by an authorised signatory of the client.

Please complete the timesheet in full.

Keep a copy for your records and hand one to the client.

Please advise your Temporary Consultant of any changes to your
assignment.