

Timesheet

Fax each Friday to Brightwater on 028 90 890 700

Employee Name: _____ Client Name: _____

Client Address: _____

_____ Week ending (Sunday): _____

HOURS WORKED

Exclusive of lunch hours & travelling time. Part Hour - Please state as a decimal (eg. 1/2 = 0.50)

DAY	STANDARD HOURS (less lunch)	OVERTIME HOURS	TOTAL HOURS (including overtime)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
TOTAL			

NB: Holidays are paid in line with current EU employment law. Please state holiday in standard hours box.

EMPLOYEE

I hereby certify the above hours worked are a correct record of the hours worked by me under my terms of engagement with Brightwater Selection (Belfast), as stated in my assignment letter.

Employee Signature:

Please forward your P45 if you have not already done so

EMPLOYER

Ihereby certify that the total hours worked are correct, and will accept your account forhours shown. I agree to your terms and conditions of business.

Signed:

Position:

Date:

IF THIS IS THE LAST WEEK OF YOUR ASSIGNMENT AND YOU REQUIRE A P45, PLEASE TICK THIS BOX

