

TIMESHEET ~ FOR LOVE & TATE TEMPORARY SUPPORT STAFF

Client Name:
(Company)

For the supply of services of:
(Name of temporary worker or limited company)

For week ending date:

	MON	TUE	WED	THURS	FRI	SAT	SUN	
START TIME								
FINISH TIME								
LUNCH BREAK								WEEKLY TOTAL
TOTAL HOURS (LESS LUNCH)								

CLIENT AUTHORISATION: I agree that the above hours are correct. I am satisfied with the work completed and have read and agreed to the terms of business.

SIGNATURE (Authorising Manager):

PRINT NAME:

POSITION:

DATE:

NB: YOUR SIGNATURE HERE COMMITS YOU TO PAYMENT FOR THE HOURS AUTHORISED. PLEASE RETAIN A COPY FOR YOUR RECORDS.



Please fax to: **020 3582 4071** or scan and email to payroll@lovetate.co.uk

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