

Time Sheet



Name of Temporary Staff:

Week Beginning:

Company Name & Address		Start	Finish	Start	Finish	Total	
		a.m.	p.m.	a.m.	p.m.	Hours	Mins
	Mon						
	Tues						
	Wed						
	Thurs						
	Fri						
Signature							
Print Name						Total	

I confirm and agree that a **TOTAL OF** HOURS, including overtime hours, have been satisfactorily worked and that payment in respect of these will be made according to your terms of business, which I accept as the basis of this transaction.

Client: Please hand two copies to the temporary employee after signature, retain the client's copy. Please note that charges which largely represent wages paid will be subject to a separate invoice which is payable within 7 days of the invoice date. Should any Chamberlain Beaumont temporary work for you directly out normal fee will be applicable.

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