

TIMESHEET

Week Ending <small>(note: our week ending dates are always Sundays)</small>	Assignment: Continuing <input type="checkbox"/> Finishing <input type="checkbox"/>
Client Company	Employee First Name
Client Address	Employee Surname
Department	Employee Position
Client Contact	Employee Signature

Day	Date	Time Start	Time Finish	Less Lunch	Hrs & Mins Worked	OFFICE USE ONLY		
						NT	OT 1	OT 2
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								
TOTAL HOURS & MINUTES WORKED								
					Hrs			
					Mins			

Please record hours as 24 hour clock and minutes as decimals to the nearest quarter hour.

CLIENT APPROVAL	
Please ensure any days not worked by the temporary have been crossed out. Your approval confirms hours worked and you will be invoiced for these hours accordingly. Your approval also confirms acceptance of our Terms and Conditions of Business. Should you directly or indirectly employ a Beaumont Consulting temporary, assigned currently or in the previous six months, a full permanent placement fee is applicable.	
Client Signature	Date
Name	Title

This timesheet must be signed and authorised by the client and returned to your consultant by Monday 11am to ensure prompt payment.

PLEASE FAX TO: 02 9279 2666

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