

TIMESHEET

Fax to 09 281 2668 or email to temps@buildingrecruitment.co.nz no later than Monday 9.30am

EMPLOYEE NA	ME:									
TEMP POSITIO	DN:									
CLIENT COMPANY:						CONTAC	T NAME:			
			MORNING		AFTERNOON		TYPE OF WORK			
	DA	ATE	FROM TO		FROM	то	LABOURER		SPECIALISED	TOTAL HOURS
MONDAY										
TUESDAY										
WEDNESDAY										
THURSDAY										
FRIDAY										
SATURDAY										
SUNDAY										
						Total				
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lient Signature:										

INSTRUCTIONS:

Please fax or email your completed and signed timesheet by **Friday 6pm** at the end of each week in order for us to process your pay early the following week. Please ensure you complete separate timesheets for each assignment.

NOTE: If you experience any delays getting your timesheet approved, please ensure you advise us by Monday 9.30am to enable us to assist you with an alternative form of client approval.