

## Contractor Timesheet

Week ending \_\_\_\_\_

Contractor name \_\_\_\_\_

Client Company \_\_\_\_\_

Client contact \_\_\_\_\_

Job no. \_\_\_\_\_

Day	Date	Start time	Lunch Start	Lunch Finish	Finish Time	Total Hours / Day
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

**Total Hours / Days** \_\_\_\_\_

**Contractor:** I hereby acknowledge that the above hours/days were worked by me on this assignment

**Contractor signature:** \_\_\_\_\_

**Client:** I (on behalf of the Client Company) hereby acknowledge that the above hours/days were worked

**Client signature:** \_\_\_\_\_

Please fax completed timesheet to (02) 8346 6777 or email to [timesheet@therecruitmentcompany.com](mailto:timesheet@therecruitmentcompany.com) by **9:30am each Tuesday**. If received after this time, payment may not be processed until Thursday of the same week.