

Weekly Time Sheet



Timesheets must be completed, signed off and returned no later than 12 noon of the following Monday. Failure to do so will delay payment.

Our Ref:	
Week Commencing:	
Employee's Name:	

Office The Coach House
60 St John's Road
Wallingford
Oxfordshire
OX10 9AG

Company Name:	
Contact Name:	
Company Address:	

Telephone 01491 20 20 20
Fax 01491 20 20 30
Email wa@secondsite.co.uk
Web www.secondsite.co.uk

DAY	DATE	START		FINISH		LUNCH		HOURS	
		Hours	Minutes	Hours	Minutes	Hours	Minutes	Hours	Minutes
Monday									
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									
Sunday									
TOTAL HOURS WORKED:									

As authorising signatory, I confirm that the details above are the total hours to be invoiced.

Client Signature:	Print Name:	
	Position:	
	Date:	

Employee Signature:

Fax your completed and signed timesheet to:

(01491) 20 20 30

You must phone to confirm receipt after faxing. Failure to do so could result in non payment.