

flexiforce

Phone (02) 4869 5505

PO Box 1148 MOSS VALE NSW 2577
Employment and Labour Hire Consultants

time sheet

Email to: timesheets@flexiforce.com.au or fax to (02) 4868 1051 by close of business Friday or by 9.00am Monday morning at the latest.

Host Employer _____
Supervisor's name _____
Job Site Address: _____

| Employee Name _____ | | | | | | | | | |
|---------------------|------|------------|-------------|---------------|-----------|------------|-------------|------------|-----------------------|
| Day | Date | Start Time | Finish Time | Unpaid Breaks | Ord-inary | Time & 1/2 | Double Time | Total Paid | Supervisors Signature |
| Mon | | | | | | | | | |
| Tue | | | | | | | | | |
| Wed | | | | | | | | | |
| Thu | | | | | | | | | |
| Fri | | | | | | | | | |
| Sat | | | | | | | | | |
| Sun | | | | | | | | | |
| Totals | | | | | | | | | |

| Employee Name _____ | | | | | | | | | |
|---------------------|------|------------|-------------|---------------|-----------|------------|-------------|------------|-----------------------|
| Day | Date | Start Time | Finish Time | Unpaid Breaks | Ord-inary | Time & 1/2 | Double Time | Total Paid | Supervisors Signature |
| Mon | | | | | | | | | |
| Tue | | | | | | | | | |
| Wed | | | | | | | | | |
| Thu | | | | | | | | | |
| Fri | | | | | | | | | |
| Sat | | | | | | | | | |
| Sun | | | | | | | | | |
| Totals | | | | | | | | | |

| Employee Name _____ | | | | | | | | | |
|---------------------|------|------------|-------------|---------------|-----------|------------|-------------|------------|-----------------------|
| Day | Date | Start Time | Finish Time | Unpaid Breaks | Ord-inary | Time & 1/2 | Double Time | Total Paid | Supervisors Signature |
| Mon | | | | | | | | | |
| Tue | | | | | | | | | |
| Wed | | | | | | | | | |
| Thu | | | | | | | | | |
| Fri | | | | | | | | | |
| Sat | | | | | | | | | |
| Sun | | | | | | | | | |
| Totals | | | | | | | | | |

ATTENTION SUPERVISOR

As the representative of the host employer your signature indicates the following:

1. You have checked all details as being correct.

2. You are satisfied with the work performed and you acknowledge your obligation to make payment at the agreed rates.

Should you be dissatisfied with the work performed please immediately contact the office of flexiforce on the above number.