

TIMESHEET

RETURN BY 9AM MONDAY
FOR PROMPT PAYMENT OF WAGES



RETURN TO

WIGAN BRANCH

29 Library Street
Wigan Lancashire
WN1 1NN

Tel: (01942) 246223

Fax: (01942) 826396

Workers Name:..... Company Name:.....

Payroll No:..... Company Address:.....

Job Description:.....

Week Commencing(Sunday):.....

DAY	HOURS START	HOURS FINISH	LUNCH BREAKS	TOTAL EXCL. LUNCH
SUNDAY				
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
TOTAL HOURS WORKED:				

SUMMARY OF HOURS

CLIENT AUTHORISATION

I agree that the hours worked by the above named person are correct as shown and the work performed was done satisfactorily. I am aware, and agree to Intro's Terms and Conditions of Business.

Signature:..... Position:

Print:..... Date: