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GSA Recruitment

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**TIME SHEET**

**PLEASE RETAIN A COPY OF THIS TIMESHEET AS YOU WILL NEED IT IN THE EVENT OF ANY PAY QUERIES.**

**IT IS THE RESPONSIBILITY OF THE TEMP TO MAKE ANY ADDITIONAL COPIES OF THIS TIMESHEET.**

**Client Company:** ………………………………………….………………………

# ………………………………………………………………….

………………………………………………………………….

………………………………………………………………….

Temp: ……………………………………………………

Week Ending Friday: ……………………………..……………………..

Job Title: ……..……………………………………………..

**1.** ALL SIGNED TIMESHEETS MUST BE RECEIVED BY GSA **NO LATER THAN 5.00pm MONDAY** TO ENSURE PROMPT PAYMENT. TIMESHEEETS CAN BE SENT VIA POST, FAX OR E-MAIL.

**2.** LATE TIMESHEETS WILL BE PAID THE FOLLOWING WEEK.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SUMMARY OF HOURS WORKED** | | | |  |  |
|  | **DATE** | **TIME**  **STARTED** | **TIME**  **FINISHED** | **DEDUCT**  **MEAL BREAKS** | **TOTAL**  **HOURS WORKED** |
| SAT |  |  |  |  |  |
| SUN |  |  |  |  |  |
| MON |  |  |  |  |  |
| TUES |  |  |  |  |  |
| WED |  |  |  |  |  |
| THUR |  |  |  |  |  |
| FRI |  |  |  |  |  |
| **TOTAL** | | | | |  |

## The signature below certifies that the above hours have been worked satisfactorily and that payment will be made in respect of these according to your terms and conditions of business which I have received and accept as the basis of this transaction.

**SUPERVISORS**

**SIGNATURE……………………………………NAME………………………………………….. DATE…………………………………… REQUIRED NEXT WEEK?**

|  |  |
| --- | --- |
| **YES** |  |
| **NO** |  |

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