

TIMESHEET



Client Name :

Address :

Temporary's Name :

Week Ending :

Client's Acceptance
 We certify that the hours worked are correct and that we will accept your account for the chargeable hours at the agreed rate.
 We accept your terms of business as previously received.
Client Signature

	Start Time	Finish Time	Total Hours	Net Hours
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				

Total Standard Hours	Total Overtime Hours	Net Hours (After Breaks)

Nights Out & Expenses (Give the reason and the cost. Receipts must be provided)

Notes

Hours worked this week for another employer

Drivers Declaration: NB: Fraudulent recording of working time is a criminal offence and may lead to criminal action being taken against you.
 1. I declare that I have accurately recorded my working time, breaks and periods of availability on this timesheet.
 2. I have notified ADN separately, in writing, of any other periods of work that constitute working time, as defined under the Working Time (Road Transport) Regulations 2005, undertaken during this week for other employers or employment businesses in order that ADN can maintain an accurate record of my working time
3. I understand that late return of this timesheet may result in any payment owed to me being delayed.

Drivers Signature:

Date:

Periods of Availability (POA's)

	Start Time	Finish Time	Start Time	Finish time	Start Time	Finish Time	Daily Total
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
							Weekly Total

Any additional POA's may be recorded on the back of this timesheet