



# TIMESHEET

Employee Name:	<b>Timesheets must be submitted by 11am MONDAYS.</b> Email: <a href="mailto:payroll@baileypersonnel.com.au">payroll@baileypersonnel.com.au</a> Fax Sydney: (02) 9317 2476 Fax Melbourne: (03) 9310 3824 Fax Brisbane: (07) 3087 0002
Client Company:	
Client Location:	

	Date	Position	Start Time	Finish Time	Meal Break	Total worked	Shift Supervisor Name	Shift Supervisor Signature
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								

<p><b>Employee / Casual:</b>          In signing this timesheet you agree that you have verified the accuracy of hours, timesheets unverified by the Client will not be paid and that you understand you must take a meal break of at least half an hour if you are working more than 5 hours.</p> <p><i>Have there been any changes to your current assignment?</i>      <b>Yes / No</b></p> <p><i>Did you have any accidents / injuries during this period?</i>      <b>Yes / No</b></p> <p><b>Signature:</b>.....</p>	<p><b>Client Supervisor:</b>          In signing this timesheet you agree that you have verified the accuracy of hours, that a minimum of four (4) ours is applicable to any shift. Any overtime / allowances will be paid and charged as per the relative award or agreement and a meal break of at least half an hour must be taken for those who work over 5 hours on any given day.</p> <p><i>Did you have any accidents / injuries on site during this period?</i>      <b>Yes / No</b></p> <p><b>Signature:</b>.....</p>
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