



INDIVIDUALTIMESHEET

ACCOUNT ADDRESS:

REPORT TO:

NAME OF TEMPORARY WORKER:

JOB CATEGORY:

WEEK ENDING SUNDAY:

RENARD ACCOUNTS

TIMESHEET NUMBER:

ACCOUNT CODE:

TEMPORARY WORKER NUMBER:

SUMMARY OF HOURS WORKED TO BE COMPLETED BY CLIENT

	TIME STARTED	TIME FINISHED	TIME TAKEN FOR MEALS	HOURS ACTUALLY WORKED	ALTERNATIVE CATEGORY
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
SATURDAY					
SUNDAY					

RENARD ACCOUNTS

OVERTIME HOURS

OVERTIME RATE

I certify that the total of hours has been

satisfactorily worked 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.

PRINT NAME

POSITION

SIGNATURE

DATE