

Timesheet



DAY	START	FINISH	BREAK	TOTAL	DAYS
				HOURS*	WORKED*
MONDAY					
TUESDAY					
WEDNESDAY					
THURSDAY					
FRIDAY					
SATURDAY					
SUNDAY					
Total Time Worked or *Days Completed					

IMPORTANT INFORMATION - PLEASE READ BEFORE COMPLETING

Please ensure your timesheet is completed fully and accurately as any errors may delay your pay.
 * If you are working on a DAY RATE simply complete the end column, otherwise complete TOTAL HOURS column only and enter all time worked to the nearest quarter hour.

Your timesheet should be either faxed to **08701 911391** or emailed to info@willsconsultants.com
 Please send by close of business each Friday. However, the **deadline** for submission is 12:00 noon Monday.
 If you are PAYE, pay advice notes will be emailed to you no later than Friday following timesheet submission.
 If you have any queries, please contact your Consultant on **01536 512202**.

CANDIDATE NAME	<input type="text"/>	COMPANY NAME	<input type="text"/>
WEEK COMENCING (MONDAY)	<input type="text"/>	CLIENT SIGNATURE	<input type="text"/>
DATE SIGNED	<input type="text"/>	PRINT NAME	<input type="text"/>

If you are eligdable and require holiday to be paid (subject to your accrued holiday fund), please complete the holiday notification below. Please note that holidays must be booked in advance and taken as **full** days only.

Holiday Notification				
I will be away from work (dates: first day off and last day off)	FROM	<input type="text"/>	TO	<input type="text"/>
Total work days absent	<input type="text"/>			
Authorised by line manager (signature)	<input type="text"/>			