

# Timesheet



Nicholas Michael Limited  
 Nine Hills Road  
 Cambridge, CB2 1GE  
 Tel: 01223 661336  
 Email: payroll@nicholasmichael-rec.co.uk

Name:

Contract Address:

Purchase Order:

Job title:

Week Ending Sunday

**A completed timesheet must be signed by both the temporary worker and the client and returned to payroll@nicholasmichael-rec.co.uk no later than 12 am Tuesday following the week worked or payment will be delayed until the following week.**

DAY	Start Time		Finish Time		Less Breaks		Total	
	Hours	Mins	Hours	Mins	Hours	Mins	Hours	Mins
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								
							Total Hours	

*Please ensure you have deducted breaks and totalled the hours to the nearest 15 minutes correctly before signing.  
 Final total should be entered in decimal e.g. 37.50 instead of 37 1.2.*

**CLIENT AUTHORISATION**

I hereby certify that the hours worked are correct and the work was completed to the client's satisfaction. I understand that this timesheet, along with the confirmation of order and rates, will be used to calculate the client's invoice which cannot be subsequently disputed for hours and quality of workmanship. I accept Nicholas Michael Limited's terms of business. I confirm that I am authorised to sign on behalf of the client. I accept that there is a minimum of 8 hours charge per day, any hours below this will be charged additionally.

Name:  Position:

Company Name:

Signature:  Date:

**OFFICE USE ONLY**

MDA:  ODA:  ID: