

INDIVIDUAL TIMESHEET

NAME _____

WEEK END DAY (Saturday) _____

DAY	DATE	COMPANY NAME (Customer's Name)	START TIME	END TIME	TOTAL HOURS TO BE PAID	TYPE OF WORK (Kitchen Assistant, Chef, Care Work etc)	WORKER'S SIGNATURE	SUPERVISOR	
								PRINT NAME	SIGNATURE
Sunday									
Monday									
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									

Please make sure that the timesheet is **signed by the supervisor** and faxed or emailed to us no later than by **Sunday**.

The email address as well as the fax can be found on top of this timesheet.

Please note that weekends are split between two different pay dates due to the week starting on Sunday.

All forms can be downloaded from our website www.whiteclawagency.co.uk