



TIMESHEET

Please ensure we receive this timesheet by 9am Monday Fax: 08 9316 4150

Employee Name:	
Company Name:	
Location:	
Week Ending:	

Employee Certification: *I have worked the following hours:*

	Date	Start	Finish	Less Break	Total Hours	Comment
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
Total Hours Worked for Week						

Employee Signature:	
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Company Authorisation: *I verify the hours stated are correct and the work has been performed in a satisfactory manner. I also understand that temporary staff are supplied in accordance with Red Dirt Personnel Group Terms of Business.*

Company Supervisor Signature:	
Company Supervisor (Printed Name)	

Thank you for using Red Dirt Personnel Group.