

TIMESHEET

T: 01202 610203 M: 07981 992333

www.agarecruit.co.uk

Your Name (agency staff)					Worker Job Title						
Monday	Date	Time Started	Time Finished	Break	Total Hrs	Manager daily signature	this for false in	by Worker declaration: I declare that the information I have given on orm is correct and complete. I understand that if I knowingly provide information this may result in disciplinary action and I may be liable secution and civil recovery proceedings.			
Tuesday							Signatu	ture: Date:			
Wednesday							Client o	declaration: I am an authorised signatory for my Company. I am			
Thursday							signing to confirm that the hours have been worked satisfactorily and are accurate, and that payment will be made in respect of these. I accepted that an introduction fee will be chargeable should an offer of employment				
Friday											
Saturday								be made by us.			
Sunday							Signatu	ture: Date:			
Total Hrs Worked							Positio	Print Name:			
Company Name:								Poster de:			
Addre	ss:							Postcode:			
Failure to do so may result in your payment being delayed and/or amended. You may incur an admin fee for not sending your timesheet on time.											
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Your Name (agency staff)					Worker Job Title						
	Date	Time Started	Time Finished	Break	Total Hrs	Manager daily signature	this f false	ncy Worker declaration: I declare that the information I have given on form is correct and complete. I understand that if I knowingly provide a information this may result in disciplinary action and I may be liable rosecution and civil recovery proceedings.			
Monday							Ciona	nature: Date:			
Tuesday							Jigila	lature.			
Wednesday								nt declaration: I am an authorised signatory for my Company. I am ing to confirm that the hours have been worked satisfactorily and are			
Thursday Friday							accurate, and that payment will be made in respect of these. I accepted that an introduction fee will be chargeable should an offer of employment be made by us.				
Saturday											
Sunday							Signs	nature: Date:			
-							Signa	lature.			
Total Hrs Worked							Posit	Print Name:			
Company Name:								7			
Address:								Postcode:			

Please ensure the time sheet is fully completed and emailed to <u>payroll@agarecruit.co.uk</u> before Monday 10 AM to secure payment on that week. Failure to do so may result in your payment being delayed and/or amended. You may incur an admin fee for not sending your timesheet on time.