

Time Sheet

WEEK ENDING:

Company Name: _____

Employee Name: _____

Department: _____

Supervisor: _____

Vehicle details: _____

Date	Start Time	End Time	Break	Total Hours	Notes
TOTALS:					

Please email completed timesheet to: ana@staffline.co.nz; ana@staffline.co.nz
BY TUESDAY MORNING. Late timesheets may result in delayed payment.

Any questions regarding wages Tess, Julie or Ana are in the office Monday - Friday 10am to 3pm
 so please email or phone 027 3988814. Please do not call with wage queries outside of these hours.

I certify that these hours are a true and accurate record of all time worked during the pay period.

Employee Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____

