



Temporary Worker Timesheet

Candidate Name:

UPN

Purchase Order No

Week Ending Date:

Client Name:

Site Name:

*****The signed timesheet must be received by payroll at Sphere Solutions by 1pm on a Tuesday or it will NOT be processed*****

DAY:	HOURS/DAYS:															
Saturday:		<table border="1"> <tr> <td rowspan="2">CANDIDATE USE ONLY</td> <td colspan="2">I understand that I must submit a signed timesheet no later than 1pm every Tuesday in order to get paid. I confirm I will total the hours correctly and deduct breaks. I must obtain a signature confirming the hours worked from an authorised signatory/representative of the client on every timesheet. I am aware that a timesheet submitted without an authorised signature will not be paid under any circumstance.</td> </tr> <tr> <td>Candidate Signature:</td> <td></td> </tr> <tr> <td rowspan="4">CLIENT USE ONLY</td> <td colspan="2">I certify that I am authorised to sign this timesheet and that the hours shown as worked are accurate with the correct breaks deducted, and that the work has been carried out to a satisfactory standard. I confirm that payment will be made according to your terms and conditions which I accept.</td> </tr> <tr> <td>Name of Signatory:</td> <td></td> </tr> <tr> <td>Client Signature:</td> <td></td> </tr> <tr> <td>Date Signed:</td> <td></td> </tr> </table>	CANDIDATE USE ONLY	I understand that I must submit a signed timesheet no later than 1pm every Tuesday in order to get paid. I confirm I will total the hours correctly and deduct breaks. I must obtain a signature confirming the hours worked from an authorised signatory/representative of the client on every timesheet. I am aware that a timesheet submitted without an authorised signature will not be paid under any circumstance.		Candidate Signature:		CLIENT USE ONLY	I certify that I am authorised to sign this timesheet and that the hours shown as worked are accurate with the correct breaks deducted, and that the work has been carried out to a satisfactory standard. I confirm that payment will be made according to your terms and conditions which I accept.		Name of Signatory:		Client Signature:		Date Signed:	
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	Date Signed:															
Sunday:																
Monday:																
Tuesday:																
Wednesday:																
Thursday:																
Friday:																
TOTAL PAYABLE HOURS/DAYS:	0															