

Name:
Weekending Date:
Client Address:

Client:
Contact:

	Start time	Finish time	Total Breaks Taken	Total Hours Worked
Mon				
Tue				
Wed				
Thu				
Fri				
Sat				
Sun				

Pay is worked out in 15 minute blocks.
 Please ensure that your working hours can be broken down into 15 minute intervals.
 Please do not state any holiday claims in the grid above. Holiday claims should be entered in the section below.

Please pay out _____ hours of my accrued holiday pay.

PLEASE ENSURE THAT YOU SUPPLY YOUR DEPARTMENT WITH A COPY OF THIS TIMESHEET

I confirm that I have worked the above hours and I have checked the 'Week: Total Hours Worked' for accuracy. I have read and agree to the PRS terms and conditions.

Signed by **TEMPORARY WORKER:** _____ Department: _____

I confirm that the temporary worker has worked the above hours and I have checked the 'Week: Total Hours Worked' for accuracy. I agree to be invoiced for the amount stated in the 'Week: Total Hours Worked' box.

Signed by **SUPERVISOR:** _____ Print Name: _____

If this is your last timesheet for this assignment please tick the relevant box below:

This is my last timesheet for this assignment. Please pay out all of my accrued holiday and add me to the pool of available temps. I am available from: _____

I am leaving PRS, please issue my P45 and pay out all of my accrued holiday

**Please ensure your timesheet is returned by 9.30am Monday, failure to do so will result in a delay in payment
 Any problems please call 01793 611116**