

TIME SHEET

STATEWIDE

STAFFING SOLUTIONS PTY LTD

QLD
Tel (07) 3208 1666
Fax (07) 3208 3200
PO Box 869 Springwood BC QLD 4127

NSW
Tel (02) 9682 4922
Fax (02) 9682 4122
PO Box 172 Granville NSW 2142

VIC
Tel (03) 9873 0600
Fax (03) 9873 0700
PO Box 350 Mitchham VIC 3132

TAS
Tel (03) 6343 7722
Fax (03) 6344 7796
PO Box 62 King Meadows TAS 7249

COMPANY NAME _____

WORKPLACE ADDRESS _____

SUPERVISOR _____

Contractor/Personnel _____

NAME _____

CLASSIFICATIONS _____

| Week Ending / / | DATE | START | FINISH | ORDINARY TIME | OFFICE USE ONLY | | Lunch Break Taken | SUPERVISORS SIGNATURE |
|-----------------|------|-------|--------|---------------|-----------------|----|-------------------|-----------------------|
| | | | | | T 1/2 | DT | | |
| MONDAY | | | | | | | Yes / No | |
| TUESDAY | | | | | | | Yes / No | |
| WEDNESDAY | | | | | | | Yes / No | |
| THURSDAY | | | | | | | Yes / No | |
| FRIDAY | | | | | | | Yes / No | |
| SATURDAY | | | | | | | Yes / No | |
| SUNDAY | | | | | | | Yes / No | |
| TOTAL | | | | | | | | |

SUPERVISORS - PLEASE CHECK THIS TIMESHEET CAREFULLY - YOUR SIGNATURE AUTHORIZES BILLABLE HOURS

White & Green Copy POST to your Statewide Office

Yellow Copy Personnel Copy

Blue Copy Site Copy

Job Order Number. _____

Cost Code: _____