

Temporary Time Sheet

COMPANY NAME AND ADDRESS:

TEMPORARY NAME:

WEEK ENDING:

DATE	DAY	START AM	FINISH AM		START PM	FINISH PM	TOTAL HOURS
	MON			Lunches only to be worked with Clients permission			
	TUE						
	WED						
	THU						
	FRI						
	SAT						
	SUN						

BASIC HOURS	OVERTIME	TOTAL HOURS
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I AGREE THE HOURS WORKED TO BE ACCURATE AND ACCEPT THE CONDITIONS LISTED BELOW

CLIENT SIGNATURE _____ **CLIENT NAME & POSITION** _____

The person named on this timesheet is under contract to Time Appointments Ltd and therefore is unable to accept any temporary or permanent employment within your company (or subsidiaries) other than by arrangement with Time Appointments and on payment of a permanent placement fee. The agency shall not be responsible for loss, damage, expense or inconvenience resulting from or caused by any willful default, dishonesty, disclosure of confidential information, breach of faith or any negligent or other act or omission by the employee while engaged on the client's business or while in the client's premises or arising out of or in any way connected with the services to which the contract relates, and the client will indemnify the Agency in respect of any liability to which the agency might therefore be exposed