



Timesheet must be received by midday Monday by email.

**australia@ywrec.com**

Name: \_\_\_\_\_

Tel No: \_\_\_\_\_

Name of Employers: \_\_\_\_\_

Department: \_\_\_\_\_

Department Tel: \_\_\_\_\_

I declare that the information on this timesheet is true. In the event of an issue regarding claimed hours, the locum will be liable to repay any overstated amount unless the timesheet has been duly authorised by the client. Any over payments should be repaid immediately as failure to do so may result in legal proceeding.

Temp Signature: \_\_\_\_\_

	Date			Start Time	Finish Time	Length of meal break	On Call Hours	Call Outs	Hours worked	Overtime Hours Worked
	D	M	Y							
Monday	:	:								
Tuesday	:	:								
Wednesday	:	:								
Thursday	:	:								
Friday	:	:								
Saturday	:	:								
Sunday	:	:								
<b>Please use 24 hour clock</b>									<b>Total Hours and Overtime Worked &gt;</b>	

We confirm

- a) Our agreement to the terms of business.
- b) That the claimed hours are correct

Authorised Signature: \_\_\_\_\_

Full Name: \_\_\_\_\_

Position: \_\_\_\_\_

