

Christies People

payroll@christiespeople.com.au

SMS: 0475 962 682

FIRST NAME: _____ CLIENT: _____

SURNAME: _____ SITE NAME: _____

WEEK ENDING: _____ SITE ADDRESS: _____

CONTACT NAME AT SITE: _____

**NOTE: NO TIMESHEETS WILL BE PROCESSED UNLESS SIGNED BY THE CLIENT.
TIMESHEETS MUST BE RECEIVE BY THE CHRISTIES PEOPLE HEAD OFFICE BY 8AM EACH WEDNESDAY.**

DAY	DATE	START TIME	FINISH TIME	LUNCH	HRS WORKED	DESCRIPTION	CLIENT SIGNATURE	CLIENT NAME
WED								
THURS								
FRI								
SAT								
SUN								
MON								
TUES								

NOTE: CLIENT TO ENSURE ALL ENTRY DETAILS ARE CORRECT. SIGNING OF THIS DOCUMENT IS ACCEPTANCE BY YOU, THE CLIENT, THAT ALL ENTRIES ARE TRUE AND CORRECT AND ALSO IS ACCEPTANCE OF CHRISTIES PEOPLE TERMS AND CONDITIONS.

COMMENTS: