

Timesheet No:

P/O Number:



Payroll No: Name: Branch: Week Ending:	JSA: Customer Name: Client Name: Client Position: Client Signature:
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I understand that we the hirer will be invoiced for the below hours in accordance with the current terms & conditions to which we have read and accepted, additionally I confirm that the work was performed satisfactorily and in accordance with the prevailing rules and conditions.

PLEASE USE 24 HOUR CLOCK

HOURS WORKED – OFFICE USE ONLY

Day	Work Type	Start Time	Finish Time	Break	Paid Hours	POA Time	WTD Time	Day Hrs	O/Time Hrs	Night Hrs	O/Time Hrs	Sat Hrs	Sun Hrs	B/Hol Hrs
Sun														
Mon														
Tue														
Wed														
Thur														
Fri														
Sat														
Totals														

Worker Declaration

In the following boxes please put **D** for Digital Card, **M** for Manual Tacho or **N** for Non Tacho for the day(s) worked at this client.

Sun	Mon	Tue	Wed	Thurs	Fri	Sat

In the following boxes please put start and finish time for any other work done **NOT** through Ocean City Recruitment Ltd

Sun	Mon	Tue	Wed	Thurs	Fri	Sat
Start:	Start:	Start:	Start:	Start:	Start:	Start:
Finish:	Finish:	Finish:	Finish:	Finish:	Finish:	Finish:

I declare the hours stated are correct and have reported to both Ocean City Recruitment and its client any problems such as Accidents, Injuries and Health & Safety dangers. I am aware that failure to return Tacho's within 35 days could lead to delay of payments.

Worker Name:

Worker Signature:

***SIGNED TIMESHEETS MUST BE IN NO LATER THAN 9AM THE FOLLOWING MONDAY – NO SIGNED TIMESHEET MAY RESULT IN DELAYED PAY**

	Charge Hours	Charge Rate	Total Charge £	Pay Hours	Pay Rate	Total Pay
Day Rate						
O/Time						
Night Rate						
O/Time						
Sat Rate						
Sun Rate						
B/Hol Rate						
Ex Tax						
Ex No Tax						
Totals						

NOTES: