

TIMESHEET

DAE & NITE STAFFING SOLUTIONS LTD

Thomas House
614 London Road
Westcliff-on-Sea
Essex SS0 9HW
Tel: 01702 245149
Mob: 07407 113463

Employee Name _____

Job Title _____

Client _____

Contract Name _____



Email: info@dnss.org.uk

Week Commencing Monday ____/____/____

Time sheets must be submitted by Sunday where practicable or 1st thing Monday morning

DAY	DATE	START TIME	FINISH TIME	BREAKS	TOTAL DAY	TOTAL NIGHT	SLEEP IN	PIC SIGNATURE
MONDAY								
TUESDAY								
WEDNESDAY								
THURSDAY								
FRIDAY								
SATURDAY								
SUNDAY								

I CONFIRM THAT I HAVE CHECKED AND VERIFIED THE TIMES AND AGREE THAT THESE HOURS WILL BE USED FOR THE CALCULATION OF THE INVOICE.

AUTHORISED BY: _____

SIGNED: _____