

Name of Company:

Name of temp worker:

Week ending (Sunday):

Site name/Job ref:

| | Start Time | Finish Time | Overtime | Total Hours |
|-----------|------------|-------------|----------|-------------|
| MONDAY | | | | |
| TUESDAY | | | | |
| WEDNESDAY | | | | |
| THURSDAY | | | | |
| FRIDAY | | | | |
| SATURDAY | | | | |
| SUNDAY | | | | |

Week total:

Please write in words and figures

Words:

Figures:

Please make sure all figures are correct before signing

Please email your signed time sheet to
accounts@ascentonsiteservices.co.uk

I certify that the above named temporary worker has been inducted onto our site and that the hours recorded have been satisfactorily worked. Payment for these hours will be made according to the terms and conditions of business which I have received and accept as the basis of this transaction.

Signature Print name

Date Position

Ascent Onsite Services Ltd

101 Lockhurst Lane / Coventry / CV6 5SF
 020 8124 9194 / www.ascentonsiteservices.co.uk

Registered in England no. 12386048
 Vat No. 340 1343 52