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Week Ending: \_\_\_\_\_

Company Name:	
Site Address:	

Temp Name:	
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Day	Registration No.	Category (LGV)	P.O.A.	Start Time	Finish Time	Less Breaks	Total
<b>SUNDAY</b>							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
<b>SATURDAY</b>							
						<b>TOTAL HOURS</b>	

Comments/Other:
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ORDER NUMBER: \_\_\_\_\_

CLIENT'S SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_ POSITION: \_\_\_\_\_

THE SIGNATURE AUTHORIZING THIS TIME SHEET IS TAKEN AS ACCEPTANCE OF HOURS WORKED AND THE WORK HAS BEEN CARRIED OUT IN A SATISFACTORY MANNER. ALL REST/BREAK PERIODS HAVE BEEN DEDUCTED WHERE NECESSARY TO INVOICE FOR THESE HOURS.

THE TEMPORARY WORKER WILL ONLY BE PAID ON THE BASIS OF SIGNED TIME SHEET.

**THE OPERATIVE AGREES TO ACCEPT WORK ON THIS CONTRACT AT AN HOURLY PAID RATE FOR A PERIOD REQUIRED BY THE CONTRACTOR ON A TEMPORARY BASIS.**

**TOP COPY FOR CLIENT RETENTION, BOTTOM COPY FOR DRIVEN RECRUITMENT LTD. OFFICE.**

**ALL TIMESHEETS MUST BE RETURNED BY NO LATER THAN 9AM MONDAY FOLLOWING THE WEEK WORKED. (IN ORDER TO BE PAID WITHIN THAT WEEK).**