Agency Worker Name (please print):					
Branch:					
Weekending Date:	Hirer Order No:				

Please list in each daily total box, the hours (to the nearest guarter hour) that will be payable after all breaks have been deducted.

Hours	MON	TUE	WED	THU	FRI	SAT	SUN		Tir	ne Sh	eet	
Start Time								Number	of Hours w	orked at::	TOTAL	Bonus/ Expenses
End Time								Basic Rate	O/Time Rate 1	O/Time Rate 2		£
Breaks												
DAILY TOTAL (minus breaks)												
I confirm th Worker has								above Age	í Co	onditions	= HOLIDAY	S = SICK

Worker has worked the total hours as stated. Total hours are NET hours after deduction of breaks. and that NuStaff Terms and Conditions of Business are acceptable as a basis of this contract.

Contact's	Signature:	

Contact's Name: _____ Position: ____

Nu-Staff Ltd., Imagination House, Station Road, Chepstow. Monmouthshire. NP16 5PB. T: 03442 645456 E: timesheets@nustaff.co.uk

NuStaff is a trading style of Nu-Staff Limited

Hirer: _____



later than 10.00am Monday morning. This may

be done via hand delivery, post or email. Time sheets will be accepted via email on the understanding it has been sent from an authorised

2 Please use SUNDAY as the LAST day of each working week, and enter the relevant date in the

3 Please enter **ALL** order numbers that may apply

4 The conditions of the contract you have entered

into are fully covered by the Terms and Conditions

email account.

to this job.

space provided above.

already supplied to yourself.

↔ REC Corporate f → in ②

