



Labor Solutions Pty Ltd

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Client Name: \_\_\_\_\_

Site Address: \_\_\_\_\_

Employee Name: \_\_\_\_\_ Job Number: \_\_\_\_\_

DAY	DATE OF WORK	JOB DESCRIPTION	START TIME	FINISH TIME	SITE FOREMAN CONFIRMATION SIGNATURE / NOTES
WEDNESDAY					
THURSDAY					
FRIDAY					
SATURDAY					
SUNDAY					
MONDAY					
TUESDAY					

IT IS THE RESPONSIBILITY OF EACH EMPLOYEE TO HAVE THEIR TIMESHEETS SIGNED BY THE SITE FORMAN AND FILLED OUT HONESTLY AND CORRECTLY.

EVERY TUESDAY NO LATER THAN 7.00PM TIMESHEETS ARE TO BE FAXED OR EMAILED TO HEAD OFFICE FOR PAYROLL PROCESS.