TIME SHEET

Ref Number

Affinity Staffing Services Limited
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E: timesheets@affinitystaffing.co.uk
W: www.affinitystaffing.co.uk

First Name		**Job Title**	
Surname		**Place of Work**	

Please use **CAPITAL** letters to fill in this timesheet.

Date	Shift Start	Shift Finish	Break Start	Break Finish	Total Hours Worked	Expenses	Client Initials

SIGNED BY YOU: The above hours are correct and I performed my duties to the best of my ability.

Signature: _____

Date: _____

SIGNED BY CLIENT: I can confirm that the (above) has completed the above hours. I am authorised within my position to sign this timesheet.

Signature: _____ Position: _____

Print Name: _____ Date: _____

A Copy of this time sheet needs to be with us by 10am MONDAY (so that we can pay you on time).

(1) You can submit it through the website

(2) You can Email this over to the office: – **timesheets@affinitystaffing.co.uk**

(3) **COPIES:** Top Copy – Your copy, Bottom Copy – Place of Work.

☐ **Good** ☐ **Satisfactory** ☐ **Unsatisfactory**