

time sheet

Week ending _____

Worker _____

Organisation _____

Once completed and authorised, **please send to: Time Sheets Dpt, TFPL Ltd, Tontine House, 8 Gordon Street, Glasgow G1 3PL. Fax 0141 248 8277**
 Payment will be made once authorisation of hours has been received by TFPL.



part of IDOX group

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	From	To	Break	Total Basic Hours	Authorised Overtime	
					time and a half	double time
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
(please use a ballpoint pen to complete) Totals to nearest 1/4 hour						

Please tick if this is your final Time Sheet for this client

Please tick if this is your FINAL Time Sheet and P45 is required

Client authorised signature _____ Please print name _____ Date _____