



**TIMESHEET MUST BE EMAILED BY 11AM MONDAY**

**EMAIL: abby@communityconsultingaustralia.com.au**

**283 -287 Sir Donald Bradman Drive, Brooklyn Park, SA 5032,**

Employees Full Name:	
Name Of Company:	
Purchase Order No.:	
Site Location:	
Week Ending:	

**MONDAY TO SUNDAY TIMESHEET**

DAY	DATE	START	FINISH	BREAKS	TOTAL HRS	SHIFT	NORMAL TIME	TIME HALF	DOUBLE TIME
MON									
TUES									
WED									
THURS									
FRI									
SAT									
SUN									

**TOTAL HOURS TO BE PAID** \_\_\_\_\_

**PLEASE HAVE CLIENT SIGNATURES FOR WAGES TO BE PROCESSED.**

**PLEASE ADVISE COMMUNITY CONSULTING IF HOURS OF WORK CHANGE SIGNIFICANTLY.**

\_\_\_\_\_  
Community Consulting Signature

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Client Name & Job Title

ALLOWANCE