



CONNECT GROUP

Contractor Timesheet

Contractors name: **Ltd Company name:**

Client Name: **Month worked:**

Date Worked	Days Worked at Standard Rate	Days Worked at Overtime Rate 1	Days Worked at Overtime Rate 2
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Total No. of Days Worked			

Please accept this as confirmation that I am satisfied with the work undertaken and on behalf of the client I authorise the number of hours quoted on the attached timesheet. This constitutes agreement to pay for this work and. I understand that my company will be invoiced accordingly.

Authorised by (signature):.....

Title:.....

Date:.....

