



Completed Timesheets ***MUST*** be returned to ASL by 9.30 am Monday.  
 Failure to fully complete or return by this deadline may result in late payment  
 Your pay is calculated in units of 15 minutes - so please  
 record your time to the nearest quarter of an hour

<b>Temp Details:</b>	<b>ASL Branch Details</b>
Temporary's Name: .....	Branch: .....
Temp Job Title: .....	
Week Commencing Date: .....	Shift Rota: .....

**Weekly Timesheet**

DAY	Date	Number of Hours Worked		Holiday Pay
		Standard (Exc Meal Breaks)	Overtime	Tick this Column to Request Holiday Pay
MON				
TUE				
WED				
THUR				
FRI				
SAT				
SUN				
<b>TOTAL HOURS:</b>				

***Please cross through any blank columns and check totals before signing***

<b>Client Authorisation:</b>	I confirm the above hours have been checked and are accurate, and hereby accept ASL Recruitment Ltd's terms and conditions of business.
Organisation: .....	Temp Required Next Week: <u>Yes / No</u>
Name: .....	Position: .....
Signature: .....	Date: .....

**Return by Fax: 01424 452998**



*'Because people  
make the difference.'*