



Southam & Warwick Employment Group Ltd

"A Class Above The Rest"

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TIME SHEET

IMPORTANT NOTE TO ALL TEMPORARIES
FAILURE TO SUBMIT A SIGNED TIME SHEET BY
9AM MONDAY MORNING WILL RESULT IN LATE PAYMENT

Week commencing:

Temporary Worker:

Reg Number:

Temporary Assignment:

Client Name:

Contact:

Tel No:

Address:

1. The form should be completed accurately, stating the number of hours actually worked, to the nearest quarter hour, and excluding any lunch time taken.
2. The Time Sheet **MUST** be signed by the client and sent to Southam & Warwick Employment Group immediately on completion to ensure prompt payment of wages.

DAY	DATE	FROM	TO	TOTAL HOURS WORKED
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
SUNDAY				
TOTAL FOR THE WEEK:				

CLIENT AUTHORISATION

We certify that the above details are correct and we agree to pay the invoice in accordance with Southam & Warwick Employment Group Terms of Business.

Date

Client's Signature

Please print name

It is strongly recommended that you retain a copy of this time sheet for your records.