



Contractor Timesheet

Contractor Name:	
Week ending date:	
Limited company or payroll provider name:	

Client Name	
Client Address	

Client Approver	
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Please enter part hours worked as decimal. i.e. 1/2 hour = 0.5						Notes
	Basic Rate	O'Time Rate	O'Time Rate 2	O'Time Rate 3	Total	
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
Total						

Contractor Approval
I certify that the above hours are a true reflection of those worked by myself/Ltd co and are in line with the terms of my engagement and my contract with Light Source People Ltd.
Print Name:
Signature:
Date:

Client Company Approval
I certify that the above time worked has been completed satisfactorily and this timesheet will be used to generate an invoice that will be paid in accordance with the agreed payment terms as per our contract with Light Source People Ltd
Print Name:
Signature:
Date:

Please email timesheets to timesheets@lightsourcepeople.com by 12pm on a Wednesday to ensure prompt payment.