



orbisresourcing
complete staffing solutions

Week Ending:

Contractor Name:

Ltd Company:

Department:

Client Company & Address:

Client Contact:

PLEASE STATE HOURS AS DECIMAL EG 1/2 HR = 0.50

	BASIC	OT 1	OT 2	OTHER	TOTAL
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
TOTAL					

Notes:

I certify that the above hours are a correct record of those worked by me under my terms of engagement and the contract signed with Orbis Resourcing Ltd.

Contractor's Signature

I certify that the hours shown above have been satisfactorily worked and accept this will form an invoice which will be paid on receipt. I confirm we have a copy of your terms of business. If I engage the Contractor on a direct basis a fee in line with Orbis Resourcing Ltd terms of business becomes payable.

Client's Authorised Signatory

TO ENSURE PROMPT PAYMENT RETURN TIMESHEET BEFORE OUR DEADLINE TO:

Orbis Resourcing Ltd, Orbis House, Goring, Berks RG8 0AD UK e: timesheets@orbis-resourcing.com t: +44 (0)1491 874111

White copy: Orbis **Pink copy:** Client **Yellow copy:** Contractor