

FAX NO: (04) 496 6399

TIMESHEET

(also available in pdf format at www.absoluteit.co.nz)

Please fax by 12.00pm each Monday

Contractor: _____

Client: _____

Week Ending: **Sunday** / /

	Date	Start Time <i>(eg, 8.30am)</i>	Break <i>(eg, ½ or 1 hr)</i>	Finish Time <i>(eg, 5.00pm)</i>	TOTAL HOURS
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
			TOTAL HOURS WORKED		

(please round to the nearest ¼ hour)

Contractor's Signature: _____

Authorised Client Signature: _____

Client's Position: _____

NB: If you are going to be absent from your contract for a period of 1 week or more and this has been authorised by the Client, please ensure you advise absolute IT **prior** to the leave being taken.

Please also note that all expenses must be claimed directly from the client using the client's approved expense claim form. If however the client authorises you to claim expenses via absolute IT, please complete the separate absoluteIT Contractor Expenses Claim Form