Once completed, this form should be sent to us by 1700 each Friday. Failure to do so may delay your pay.

You can email it to us at hello@wellplacedhr.co.uk or upload it through our website www.wellplacedhr.co.uk/temps-area

Feel free to send a scanned copy or a photo

Week Ending: $\qquad$

Name of Temporary Worker: $\qquad$
Name of Client: $\qquad$

Address of Client: $\qquad$

Contact Name \& Title: $\qquad$
(Please advise if invoicing details differ from the above)

| DAY | NUMBER OF HOURS WORKED <br> IN DECIMALS |  | DAILY TOTAL <br> OF HOURS <br> IN DECIMALS | HOLIDAY <br> REQUEST <br> IN DECIMALS | EXPENSES <br> $(£)$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | AM | PM |  |  |  |
| Saturday |  |  |  |  |  |
| Sunday |  |  |  |  |  |
| Monday |  |  |  |  |  |
| Tuesday |  |  |  |  |  |
| Wednesday |  |  |  |  |  |
| Thursday |  |  |  |  |  |
| Friday |  |  |  |  |  |

I confirm that the above Temporary Worker has worked the hours stated and agree to settle your invoice within seven days of presentation in accordance with your Terms and Conditions of Business.

These terms and conditions are available on request at any time - hello@wellplacedhr.co.uk

Authorised Client Signature: $\qquad$ Position: $\qquad$

I hereby certify that the above is a correct record of the hours I have worked for the week ending stated above.
Temp Signature: $\qquad$

Date: $\qquad$

T: 01872309400 E: hello@wellplacedhr.co.uk W: www.wellplacedhr.co.uk A: Well Placed HR, Meridian House, Heron Way, Truro, Cornwall, TR1 2XN

