

**DAILY EMPLOYEE TIME SHEET**

Week Ending:    /    /

Employee Name:

Client Name:

Department/Ward:

Employee Position:

Supervisor Name &amp; Role:

Shift (Please Circle)			Day (Please Circle)							
AM	PM	ND	MON	TUES	WED	THU	FRI	SAT	SUN	
<b>Date</b>				D	D	M	M	Y	Y	
<b>Start (24 Hour Clock)</b>										
<b>Finish (24 Hour Clock)</b>										
<b>Meal Break</b>										
<b>Employee's Signature</b>										
<b>Supervisors's Signature</b>										
<b>Total Time Worked (Hours &amp; Minutes)</b>										

*The above signature signifies acceptance of the total hours and the terms and conditions of Workforce Extensions*

**Comments:**
**W.H. & S. (This must be completed for Payroll to be processed)**

- 1/ Did you undertake an induction when you first started work on this site? ..... Y / N  
 2/ Did you wear the required Personal Protective Equipment? ..... Y / N  
 3/ Were you involved in or witness any incident, accident or near miss? ..... Y / N

**IMPORTANT NOTE: Photo of your Paper timesheet must be emailed to lakewoodpayroll@workext.com.au at the end of week (Sunday)**
**Time Sheets will be paid at the agreed rate into your bank account on Thursday.**

Conditions include: Rehire of an employee must be through Workforce Extensions. Converting to Permanent incurs a Temp to Perm Fee.

FRM - 107 - Timesheet (Daily Format - Supervisor Sig) V4 | 29/03/2023
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