

Timesheet

Worker Name:		Week Ending:	
Nature of Job:		Report To:	
Client Name & Address:			

Day	Date	Start Time	Finish Time	Break	P.O.A	Night-Out	Total Hours
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							

Worker Declaration:

I acknowledge that I am required to inform about all my working time irrespective of whether I work for Excellent Business Services (EBS) or another employer. I affirm that the information provided in this timesheet is entirely accurate. I understand that PCN fines will be deducted directly from my wages. Any falsification of the information on this timesheet may result in prosecution under the Road Transport Working Time Regulations and/or the termination of my engagement with EBS.

I declare that I have provided correct and complete information on this timesheet, and I have not claimed these shifts or hours elsewhere. I understand that deliberately providing false information may lead to disciplinary action and potential prosecution and civil recovery proceedings against me. I consent to the disclosure of this information by means of this timesheet to and by any authorized body of EBS for the purpose of verifying this claim and investigating, preventing, detecting, and prosecuting fraud.

Client Declaration:

As an authorized signatory for the above-mentioned client, I confirm that the shifts or hours recorded on this timesheet are accurate, and we approve the payment. I consent to the disclosure of this information by means of this timesheet to and by any authorized body of Excellent Business Services (EBS) for the purpose of verifying this claim and investigating, preventing, detecting, and prosecuting fraud. I confirm that I/we understand and agree to the current terms of business of Excellent Business Services. A standard introduction fee, as per our terms of business, will be charged if one of our workers is hired fulltime by you or engaged through a different agency.

Worker Name:		ID No.:		Staff Name:		Position:	
Signature:		Date:		Signature:		Date:	