

PLEASE FAX OR EMAIL TIMESHEETS DIRECT BY 5PM MONDAY
PLEASE EMAIL TO accounts@baselinegroup.com.au

EMPLOYEE NAME		POSITION	CLIENT NAME	SITE NAME	WEEK ENDING (SUNDAY)	
DATES		HOURS SUMMARY				
DATE	DAY	START HH:MM	FINISH HH:MM	TOTAL HOURS	TRAVEL TIME (only if authorised)	NOTES
	MON					
	TUE					
	WED					
	THU					
	FRI					
	SAT					
	SUN					
TOTAL						

THIS TIMESHEET CAN NOT BE PROCESSED WITHOUT CLIENT SIGNATURE

Employee Declaration

I hereby declare that this timesheet is accurate and understand that fraudulent submission of timesheets is illegal. I confirm that, for work undertaken on the above dates, I have notified my Baseline Group project co-ordinator of my involvement with any on-site incidents, accidents or near misses and that my assignment duties have not varied from the original job brief.

Employee Signature :

Print Name :

Client / Supervisor Declaration

As an authorized representative of the organization, I accept and approve that the above hours worked are correct. By signing this Timesheet, I acknowledge my acceptance of the Baseline Group Terms and Conditions of Business, including the payment terms. I understand that no payment will be made to the employee unless the Timesheet is signed by the authoriser.

Client / Supervisor Signature :

Print Name :

Document Ref	027-FOR	Document Name	Employee Timesheet		
Document Owner	E Tobias	Document Approver	J Watkins		
Version	7	Revision Date	1 st February 2015	Review Date	1 st January 2016