

OFFICE USE ONLY

ENTERED:

INVOICE NUMBER:



CUTCH AND HUTCH PTY LTD

ABN 81 125 267 487
 UNIT 6/ 10 WOODS AVENUE WOOLAHRA NSW 2025
 P O BOX 192 127 BONDI ROAD BONDI NSW 2026

T 02 9327 7677
 F 02 9362 3895
 M 0407 706 843 (SI HUTCH)
 M 0431 293 692 (DAVE HUTCH)
 E accounts@cutchandhutch.com

CLIENT/COMPANY: _____

JOB #: _____

LOCATION: _____

WEEK ENDING (SUNDAY): _____

DATE	DAY	DESCRIPTION	START	FINISH	BREAK	TOTAL (minus break)	OFFICE USE					WORK CODE	FOREMAN DAILY SIGNOFF
							N	O	D	T	M		
	MON												
	TUES												
	WED												
	THUR												
	FRI												
	SAT												
	SUN												
TOTAL HOURS: please deduct lunch breaks													

WORK CODES: GL - GENERAL LABOURING TC - TRAFFIC CONTROL FA - FIRST AID S - SUPERVISER G - GYROCKING C - CARPENTRY PC - PRESSURE CLEAN

Employee:	In signing this timesheet you certify that the hours are correct. This signed timesheet has been approved and signed by the clients designated representative. All timesheets must be clear and contain dates, a brief description of works carried out each day, start and finish times, total hours worked and <u>please deduct lunch breaks</u> . Timesheets are required every week, please ensure that you either fax or email to the above details BEFORE 5:00PM ON SATURDAY! Please contact Si or Dave Hutch if you cannot make this cut off time. If not recieved before this time, you will not be paid until the following week.
Employee Signature:	
Foreman Name:	
Foreman Signature:	

WHITE COPY - CUTCH AND HUTCH **TIME SHEETS MUST BE SENT TO THE OFFICE BEFORE SATURDAY EVENING** **BLUE COPY- CLIENT**

FAX TIME SHEET TO - 02 9362 3895 OR EMAIL TO - accounts@cutchandhutch.com BY 5PM SATURDAY