



5 Boon Street, PO Box 134, Whakatane  
 Ph: 07 308 5030 Fax: 07 308 5033 Email: admin@adcam.co.nz

## TIMESHEET

Company .....

Contact Person .....

Postal Address .....

ADCAM Recruitment Temp .....

Logged Timesheet hours – WEEK ENDING \_\_\_\_\_  
 (Weekly pay period runs from Monday to Sunday)

	DATE	START	FINISH	LUNCH	START	FINISH	TOTAL
MON							
TUES							
WED							
THUR							
FRI							
	<b>TOTAL HOURS</b>						

Mileage Allowance (if applicable) \$ .....

Signature of Attending Temp .....

Signature of Company Supervisor .....

Date .....

This Document is to be signed by your Manager/Supervisor and returned to ADCAM Recruiting Ltd by 3pm on the Monday following the end of each week worked.

It is the responsibility of the attending Temp Employee to make sure that these signatures are recorded. This is a pre-requisite of payment of wages, and invoicing to the client.

Prue Gray  
 Managing Director