



P R O V ID IN G T HE GO L D S TA N D A R D I N T E M P I N G S I N CE 1999

**I M P O R TA N T :**

All timesheets must be returned by **12:00pm MIDDAY on Monday** in order to receive your pay on Friday. Timesheets after this time will be processed the following week.

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| --- |
| **3Q T E M P D E TA I LS :** |
| Name: |
| Position: |
| Client name: |
| Location / Unit: |

|  |
| --- |
| **CL I E N T D E TA I LS :** |
| Client: |
| Report to: |
| Title: |
| Department: |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **D AT E O F W E E K E N D:** | | | | | | | |
|  | **M O N D AY** | **T U E S D AY** | **W E D N E S D AY** | **T HUR S D AY** | **F R I D AY** | **S AT U R D AY** | **S U N D AY** |
| Date: |  |  |  |  |  |  |  |
| Start Time: |  |  |  |  |  |  |  |
| Finish Time: |  |  |  |  |  |  |  |
| Breaks: (deduct from hours) |  |  |  |  |  |  |  |
| Saturday Premium: (v' or X) |  |  |  |  |  |  |  |
| **Total Hours:** |  |  |  |  |  |  |  |
|  | **T O TA L H O U RS T H I S W E E K :** | | | | | | |

I hereby certify that the total hours signed for a correct record of the hours worked and any and all breaks have been deducted. I also confirm that the Client Organisation will make payment within fourteen days of invoice.

**P r i nt A u th o r is e d**

**Na m e : T i t le:**

**S ign a t u r e:**

**D at e :**

**N O T E S T O CL I E N T :** Signature on the timesheet confirms acceptance of 3Q Recruitment charge rates, terms & conditions and satisfaction of the duties carried out.



**Tel:** 01 878 3335 **Fax:** 01 878 3354 **Email:** [payroll@3recruitment.ie](mailto:payroll@3recruitment.ie) **Web:** w w w.3qrecruitment. ie

T H A N K Y O U F O R U S I N G T H E S E R V I CE S O F 3Q R E CR U I T M E N T