



**AustCorp Executive**

Austcorp Consulting  
 LEVEL5,215-217 Clarence St  
 Sydney NSW 2000  
 www.austcorpexecutive.com.au

Contractor:		Issue Date:	
End Client:		Week Commencing Monday:	
Accounts Contact:	Adele Ephron	Standard Hours per week:	
Accounts Tel:	02 82521111	Standard Days per Week:	
		Overtime Applicable:	YES / NO
Accounts E-mail:		Rate Type:	HOURLY / DAILY
		Cost Centre (if known):	

	DATE	HOURS		BREAK (hrs & mins)	TOTAL		PLEASE TICK IF NOT WORKED
		START TIME	END TIME		HOURS	DAYS	
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
				<b>Total</b>			

Contractor Signature: \_\_\_\_\_  
 Contractor Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

Over time if applicable: \_\_\_\_\_  
 Approved Hours Total: \_\_\_\_\_  
 Approved Days: \_\_\_\_\_

Managers Name: \_\_\_\_\_  
 Managers Signature: \_\_\_\_\_  
 Managers Position: \_\_\_\_\_  
 Date: \_\_\_\_\_

Managers Name: \_\_\_\_\_  
 Managers Signature: \_\_\_\_\_  
 Managers Position: \_\_\_\_\_  
 Date: \_\_\_\_\_

**PLEASE ENSURE TIMESHEET IS APPROVED AND SUBMITTED TO AUSTCORP BY 5PM MONDAY WEEKLY**