



TIGER TURF
TIME SHEET

Employee No:

Employee Name:

W/E/...../20

Daily Start and Finish Times		Job Location (Client)	Worksheet Number	Hours	Total Hours Per Day	Office Use Only	
						Overtime	Authorised
A.M.	WEDNESDAY						
P.M.							
A.M.	THURSDAY						
P.M.							
A.M.	FRIDAY						
P.M.							
A.M.	SATURDAY						
P.M.							
A.M.	SUNDAY						
P.M.							
A.M.	MONDAY						
P.M.							
A.M.	TUESDAY						
P.M.							
				TOTAL			

Notes: _____

Hours checked and correct: _____

Signed Employee: _____

Signed Team Leader: _____ Signed Supervisor: _____

Motor Vehicle Reg. No: _____ Trailer Reg. No: _____

Timesheets MUST be submitted by 10:00am on Monday morning

