



Contractor Time Sheet – Hourly Rate

| | |
|-----------------|--|
| Contractor Name | |
| Week Ending | |
| Company Name | |
| Client Contact | |

| Day | Start Time | Breaks | Finish Time | Total Time Worked | Hours to be Paid |
|---|------------|--------|-------------|-------------------|------------------|
| Mon | | | | | |
| Tues | | | | | |
| Wed | | | | | |
| Thurs | | | | | |
| Fri | | | | | |
| Sat | | | | | |
| Sun | | | | | |
| Total hours authorised for payment | | | | | |

| | Signed | Date |
|--|--------|------|
| (Contractor) | | |
| (Client) | | |
| (Director Impact Executive Solutions) | | |

Please fax back to (02) 8211 5286