



# CONTRACT-MONTHLY TIME SHEET

Licence No. 01C3135

Name of Employee: _____	NRIC No.: _____
Bank's Name: _____	Account No.: _____

For the month of:							
No.	Date	Time Started	Time Finished	Less Lunch Period	Total Hours		Remarks
					Normal	Overtime	
1							
2							
3							
4							
5							
6							
7							
8							
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24							
25							
26							
27							
28							
29							
30							
31							

Company name: _____		
Company Stamp	Authorised Name	Employee's Signature

**MAIN OFFICE**

8 Eu Tong Sen Street #14-89  
The Central Singapore 059818  
**Tel : +65 6737 2414** Fax : +65 6227 9668

**TAMPINES OFFICE**

No 1 Tampines Central 5 #06-04/05  
CPF Tampines Building Singapore 529508  
**Tel : +65 6226 2414** Fax : +65 6221 7317

**ACCOUNTS DEPARTMENT (Tampines office)**

Tel: 6226 2414 Fax: 6221 7317  
Email : accs@temp-team.com.sg

The undersigned on behalf of the company hereby certify and confirm the above stated hours and agree to the terms and conditions of services and payment as indicated by TEMP-TEAM Pte Ltd.

\* Candidate: Important to ensure that this time sheet is completely filled up, duly signed and with company stamp.