

## ALLMEN INDUSTRIAL SERVICES WEEKLY TIMESHEET

Full Name: \_\_\_\_\_

Client Name: \_\_\_\_\_

Employee Position: \_\_\_\_\_

Job Site: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Week Ending: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Week ends on a Sunday)

Day	Date	Start Time	Finish Time	Lunch Break Y/N	Normal Time	Time & Half	Double Time	Double Time & Half	Meal Allowance	Afternoon or Nightshift	Comments
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
Saturday											
Sunday											

**Email: payroll@allmenindustrial.com.au**  
Phone: 4274 0723

Supervisor's Name: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_

**NOTE:** Send Timesheets no later than Monday 12:00PM (Noon) on the first day of the new pay week.