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## Timesheet Contractor's Details

Contractor's Name:

Position:

Client:

Department:

Nexere Consulting Contact:

Timesheet No.

Week Ending:

## Hours

	Date	Start Time	End Time	Breaks	Hours Claimed
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
				<b>Total Hours Claimed</b>	

I certify that the hours shown on this time sheet and any claims for travel expenses including petrol claims have been worked and are correct

Name

Signed

Position

Date

## Client Authorisation

I certify that the hours shown on this time sheet and any claims for travel expenses including petrol claims have been worked and are correct and accept that this will form the basis of an invoice, which will be paid in line with our agreed terms of business.

Name

Signed

Position

Date