

Time Sheet

Within Australia Only
Fax: 1300 132 342

Email : tpac@tpac.com.au
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Week Ending: 20 Pages: Form No.

Day Month Year

Contractor No : - Booking No : -

Contractor Name :

Payment Made as Own Company / Business: YES NO Invoice No: (please send invoice with time sheet)

Client Organisation :

	Start Time (HH:MM)	Finish Time (HH:MM)	Meal Break (HH:MM)	Total Hours (HH:MM)	Days	No of Kilometres
Example	0 8 : 3 0	0 5 : 0 0	0 0 : 3 0	0 8 : 0 0	1	5 0
Mon	:	:	:	:		
Tue	:	:	:	:		
Wed	:	:	:	:		
Thu	:	:	:	:		
Fri	:	:	:	:		
Sat	:	:	:	:		
Sun	:	:	:	:		
Total for Week:				:		



Authoriser's Name:

Position Held: Cost Centre / Department:

Authoriser's Signature _____

Contractor Signature _____

As an authorized representative of the organisation, I accept and approve that the above hours/days worked are correct. By signing this Time Sheet, I acknowledge my acceptance of the tpa Terms of Business, including the payment terms. I understand that no payment will be made to the Contractor unless the Time Sheet is signed by the authoriser.

Please fax by close of business on Friday. Note: Time Sheets not received by the Friday deadline will result in no payment being made to you for those hours. The fax number should only be used for time sheets and independent contractor invoices.

Continuing with this assignment next week YES NO