



EBR TIMESHEET

Client Name:	
Fortnight starting on Monday:	

Day	Start time	Finish time	Break time	Total	Office Use
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

Please calculate to the nearest quarter hour. Weekly Total: _____

Day	Start time	Finish time	Break time	Total	Office Use
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

Please calculate to the nearest quarter hour. Weekly Total: _____

Fortnightly Totals

Total Hours x 1.0	
Total Hours x 1.5	
Total Hours x 2.0	

Total Hours x 2.5	
Total Hours x 3.0	

Contractor's Name (please print)

Supervisor's Name (please print)

Contractor's Title

Supervisor's Title

Is your contract likely to cease in the next 2 weeks?

Supervisor's Contact Number

Contractor's Signature

Supervisor's Signature

Candidate declaration:

I verify that the above information is true and correct, that I have not sustained a work related, standard hazard/incident/injury.

Please fax completed timesheet to EBR on (02) 9412 3425 or email to timesheet@ebr.com.au

Client Authorisation:

I verify that the hours stated on this timesheet are correct and fulfilled to my satisfaction. I have read, understand and accept the business and payment terms of EBR as outlined in the employment contract and EBR's Terms and Conditions, which have been signed by your company.

Please note: Timesheets are due fortnightly on Friday by 5.00pm. If work is carried out over the weekend, and has been agreed upon by your supervisor, your timesheet will be due on the Monday by 12.00pm (midday).