

**This Timesheet must be with Total Talent Solutions before 9am on Monday, failure to meet this deadline will result in a delayed payment.**



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Company Name \_\_\_\_\_ Unit/Dept./Order No. \_\_\_\_\_

Employee Name \_\_\_\_\_

Week Starting Monday / / Week Ending Sunday / /

Day	Start Time	Finish Time	Department / Unit	Overtime Hours X 1.5	Overtime Hours X 2	Breaks			Total Hours to be Paid Ex. Breaks	Confirmed By	Please give reason if breaks were not received
						Break 1 In mins	Break 2 In mins	Break 3 In mins			
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
Saturday											
Sunday											

**Employee Signature** \_\_\_\_\_ **Comments:** \_\_\_\_\_

Before sending this timesheet, please ensure all hours are totalled correctly and that you **and** your manager have signed that all hours are correct.

**Clients Signature** \_\_\_\_\_ **Comments:** \_\_\_\_\_

If a client engages a Candidate in a temporary/permanent position within 12 months of the completion by that Candidate of his/her assignment with the client, the client will be liable to the company for the temporary/permanent introduction fee. By signing this timesheet I authorise Total Talent Solutions to pay the employee all hours claimed and raise an invoice accordingly.