

## **INDIVIDUAL TIMESHEET**

Site Name:	Supervisor's Name:	
Site Address:	Supervisor's Signature:	
Weekending:	Date:	

Employee Details	Day	Date	Start Time	Finish Time	Meal Break	Total Hours	Ord	Time + 1/2	Double Time	Shift D/A/N
Surname:	Mon									
First Name:	Tue									
Position:	Wed									
Comments:	Thu									
	Fri									
	Sat									
	Sun									
			Total							

## All timesheets must be sent to the appropriate Staff Australia Payroll Department by Monday 10am to avoid delays in processing

Hallam VIC: <u>multimesheets@staffaus.com.au</u> Keilor VIC: <u>timesheets@staffaus.com.au</u> NSW: <u>nswtimesheets@staffaus.com.au</u>

**QLD**: qldtimesheets@staffaus.com.au **WA**: perthtimesheets@staffaus.com.au