



## TIME SHEET

Consultant: \_\_\_\_\_

Month Ending: \_\_\_\_\_

**Please record days worked by marking relevant box**

Week commencing (sun)	Sun	Mon	Tue	Wed	Thurs	Fri	Sat	Total for week
<b>Total days for Month</b>								

**Client's Confirmation:**

I confirm that the total days shown above shall be invoiced to my company at the agreed rate

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_

Company: \_\_\_\_\_

**Consultant's Confirmation:**

I confirm that this is an accurate record of my days

Signature: \_\_\_\_\_

Please fax a copy to **0845 2808950** or email to **timesheets@reflexgroup.co.uk**.  
Copies for the Client and consultant.