

Signature

Date





TIMESHEETS MUST BE SIGNED AND SUBMITTED TO timesheets@melrec.com.au BY 10AM MONDAY TO ENSURE NO DELAY IN PAYMENT. IT IS YOUR RESPONSIBILITY TO GET YOUR TIMESHEET APPROVED BY A SUPERVISOR

| CANDIDATE NAME | = : | | | WEEK ENDING (SUNDAY | <mark>/)</mark> : | | | | | |
|-----------------------------|------------|---|-------------------------|-----------------------------------|---|--|-----------------------|--|--|--|
| OST EMPLOYER: SITE ADDRESS: | | | | | | | | | | |
| DAY | DATE | START TIME (7:00am) | BREAK (E.g. 30 mins) | FINISH TIME (3:30pm) | TOTAL HOURS WORKED | Supervisor Name | Job / Team Number | | | |
| MONDAY | | | Y/N | | | | | | | |
| TUESDAY | | | Y/N | | | | | | | |
| WEDNESDAY | | | Y/N | | | | | | | |
| THURSDAY | | | Y/N | | | | | | | |
| FRIDAY | | | Y/N | | | | | | | |
| SATURDAY | | | Y/N | | | | | | | |
| SUNDAY | | | Y/N | | | | | | | |
| | | I am authorised to approve the eed rates stated in Melrec/Quel | | one t super BE PR If the | rvisor. <u>UNSIGNED TIMESHE</u> ROCESSED TO BE PAID. | per Host Employer and <u>MUS</u> <u>ETS</u> will not be accepted by o O min break will be deducted, | ur payroll and WILL N | | | |
| | | he hours stated are true and co | | | | OFFICE USE ONLY | | | | |

| Total Ordinary Hours | Overtime 1 | |
|----------------------|------------------|--|
| Overtime 2 | TOTAL HOURS PAID | |