

NAME:

CLIENT:

W/E SUNDAY: (DD/MM/YY)

- Please enter the Client Name, your name and the Week Ending Date
- Use the 24 hour clock when recording your start and finish time
- Record all hours to the nearest 15 minutes
- Record all file/project numbers if applicable
- Deduct all breaks including lunch breaks.
- Clearly detail holiday & sickness

DAY	FILE No. /PROJECT	START	FINISH	BREAKS	HOURS WORKED
Mon					
Tues					
Wed					
Thurs					
Fri					
Sat					
Sun					
TOTAL HOURS					
<i>For Origin</i>			<i>Basic Hours</i>		
<i>Paralegal use</i>			<i>Overtime Hours</i>		
<i>only</i>			<i>Premium Overtime</i>		

Please sign and date your timesheet and ensure that your supervisor signs your timesheet and keeps a copy. Please copy the timesheet for yourself and the client and then post or FAX (01206 233501) a copy to Origin Paralegal by Monday 12:00 to ensure payment. **Please note - it is your responsibility to ensure that Origin Paralegal receives your timesheet.**

TO BE COMPLETED BY THE CLIENT	
Contact name:	Position:
Client signature:	Date:
TO BE COMPLETED BY THE CANDIDATE	
I declare that the contents of this timesheet are true. In the event of a dispute regarding claimed hours/days, I will be liable to repay any overstated amount unless the timesheet has been duly authorised by the client.	
Name:	
Signature:	Date: