



Please fax this timesheet to
0870 220 0927

Candidate Name	
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Client name	
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Assignment title		W/E	__/__/__
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Huntress Consultant		Huntress Branch	
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Detail*	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Total

Candidate

I certify that the above hours are a true reflection of my completed assignment

Signature

Client

I confirm that the assignment has been satisfactorily completed for this period and authorise the above time for payment. By signing this I accept Huntress' Terms of Business

Signature Date

Print name

* Use, if necessary, to distinguish between different rate types ("Standard", "On Call" etc), different projects, locations or departments etc.