

To ensure payment please complete and return  
 signed timesheet by 6.00pm Fridays. Facsimile: 03 9510 3757  
 Artisan Recruitment Pty Ltd ABN: 64 088 612 444



Weekday	Date	Start	Finish	Breaks	Sub Total
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
Is this assignment continuing?				Yes <input type="checkbox"/> No <input type="checkbox"/>	Total Hours

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

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

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

Week Ending: (Sunday) \_\_\_\_\_

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

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

Artisan terms and conditions of business apply

OFFICE USE ONLY

Job #: \_\_\_\_\_

Inv #: \_\_\_\_\_

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

Week Ending: (Sunday) \_\_\_\_\_

Hours: \_\_\_\_\_ N: \_\_\_\_\_

E: \_\_\_\_\_ N: \_\_\_\_\_

Artisan Recruitment Pty Ltd [www.getartisan.com.au](http://www.getartisan.com.au)

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