

TIME SHEET



LO-GO
Appointments

People who know Local Government

Employee Name: _____

Council: _____

Purchase Order No./Reference: _____

Week Ending _____

Please ensure your timesheet is signed and sent to
LO-GO Appointments no later than **9.00am Monday morning**
EMAIL – wa@logoapp.com.au / **FAX** – (08) 9381 1545

	Date	Start Time	Finish Time	Less Lunch	Ordinary Hours	Time ½	Double Time	Double Time 1/2	Total Hours
Sunday									
Monday									
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									
TOTAL HOURS									

SUPERVISOR TO COMPLETE

Please tick to indicate the employee's work performance below:

Excellent	
Very Good	
Good	
Poor	
Please phone to discuss	
Is the employee continuing in the assignment?	Yes/No

I verify the above hours are true & correct:

Employee's Signature: _____

Supervisor's Signature: _____

Supervisor's Name: _____

Subiaco Office: Suite 3/74 Hay Street (PO Box 8074), Subiaco WA 6008; Ph: (08) 9380 4505

Mandurah Office: Suite 8/59 Reserve Drive, Mandurah WA 6210; Ph: (08) 9584 2640

Fax: (08) 9381 1545

Email: wa@logoapp.com.au

Website: www.logoapp.com.au