



FAX your timesheet to: 30114692 or

EMAIL your timesheet to hktimesheets@roberthalf.com.hk

FOR PAYROLL QUERIES PLEASE CONTACT THE PAYROLL DEPARTMENT ON 30714941

PLEASE ENSURE YOU SELECT YOUR DIVISION:

Finance & Accounting

Management Resources

Client		Employee name	
Address		Month ending	

PLEASE ENTER TIME TO THE NEAREST QUARTER OR DAY

****If taking leave, please indicate TYPE of leave taken and ensure you attach your MEDICAL CERTIFICATE for sick days****

WEEK END DATE	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
02/09/2012						1	2
09/09/2012	3	4	5	6	7	8	9
16/09/2012	10	11	12	13	14	15	16
23/09/2012	17	18	19	20	21	22	23
30/09/2012	24	25	26	27	28	29	30

I certify that the hours and days shown on this timesheet are correct and were worked by me at the client above.

Candidate Signature _____ Date _____

CLIENT APPROVAL

The total hours as shown on this timesheet are correct. By signing this Client Approval we acknowledge our receipt and acceptance of the Robert Half Hong Kong's Terms of Business.

Client signature _____ Position _____ Date _____

Client Name (Print) _____

Visit our website at www.roberthalf.com.hk