Employee Name:							nue:		pinnacle people			
I						Department / Area:				' people		
Job Title:				Employee	No.:	Reporting To:				TIMESHEET		
DAY	DATE	START		BREAK 1		BREAK 2	FINISH	HOURS	CLIENT	Week Ending Sunday /		
Monday	DAIL	JIAKI	FROM	ТО	FROM	ТО	TINIOTT	WORKED	INITIALS	1. CLIENT TO SIGN THIS SECTION		
Tuesday										In my capacity as the client representative - by authorising		
Wednesday										this timesheet, I agree to the Pinnacle People standard terms of business as presented on their website on this day.		
Thursday										This includes break penalties and fees for directly hiring this Pinnacle People employee.		
Friday										Important note - If an employee assigned to you is not given a 30 minute break within five (5) or six (6) hours of the		
Saturday										employee's start time you will be charged break penalties. CLIENT REP NAME:		
Sunday										TITLE:		
<u> </u>	24 HOUR CL	OCK FOR TIMI	I ES							SIGNED:		
Please refer to	the conditions	or all shifts over of the governing								2. TIME SUBMISSION		
break periods.										At the completion of each shift, the employee is to enter times in nearest 5 minute intervals. For example 13:05		
PERFORMAN	NCE			 k:*	***	•	****	**	_ ***	not 13:02 and complete the full line for the day worked. Please include any breaks and total hours worked.		
CLIENT CON	AMENTS	Not suitable		erage	Good		Very Good	Exce		3. EMPLOYEE SIGNATURE COLLECTION		
CLILINI CON	MINICINIO									Employee is to obtain the clients initials for each day of work. At the conclusion of the last shift for the week, the		
			ts may prefer to		ts or feedback to	_	State via details in t	_		employee and the client are to fill in the below approval section in points 3 and 4. Signatures must be obtained		
Please ci		MELBOURNE Payroll Contact:			act: sydpayroll@		ontact: brispayroll@		act: brispay-	for any shift, including single shifts, and at any site. 4. EMPLOYEE TO SIGN THIS SECTION		
applicable pinnaclepeople.com.au phone: 03 86241777 Emprenous 0419, 561, 473		Phone: 02 82	298 3111	Phone: 07	ople.com.au 7 3225 9999	Phone: 07 55		My signature verifies that I have recorded all details of				
Emergency, 0410 301 473		Emergency: 0417 727 679		Emergency: 0438 002 505		Emergency: 0438 002 505		these shifts accurately; including, start, finish time and breaks taken. I confirm that no injury has been sustained				
PERTH ADELAIDE Payroll Contact: perpayroll@ Payroll Contact: adelpayroll@		CANBERRA Payroll Conta	act: actpayroll@			HOBART Payroll Conta		during the course of these shifts. Employees please note you must obtain a client's				
pinnaclepeople.com.au Phone: 08 9287 3888 pinnaclepeople.com.au Phone: 08 8100 7800		pinnaclepeople.com.au Phone: 02 6248 0066		pinnaclepeople.com.au Phone: 08 8941 5000		Phone: 03 62		signature before your wages can be processed.				
Emergency: 04	09 527 305	Emergency: 042	1 544 198	Emergency:	0439 100 269	Emergeno	cy: 0437 988 680	Emergency: (0428 041 118	SIGNED:		
5. ENTER TH	HE TIMESHE	ETS										
	a photo of you						Step 3 - This cop			FOR FURTHER INFORMATION ON OUR TERMS AND CONDITIONS, PLEASE REFER TO OUR WEBSITE		
		ok and upload a phot e hour of last shift wo					he conclusion of the I	st shift at each site.	If the			
Employee Na	ame:					Client / Vei	niie.		,			
Employee Name.						Department / Area:				pinnacle people		
				Ι		•				people		
Job Title:				Employee	No.:	Reporting	lo:			TIMESHEET		
DAY	DATE	START		BREAK 1		BREAK 2	FINISH	HOURS	CLIENT			
	DAIL	JIAKI	FROM	ТО	FROM	ТО	TINIOTT	WORKED	INITIALS	Week Ending Sunday / / 1. CLIENT TO SIGN THIS SECTION		
Monday						-				In my capacity as the client representative - by authorising		
Tuesday Wednesday										this timesheet, I agree to the Pinnacle People standard terms of business as presented on their website on this day.		
Thursday					+ -					This includes break penalties and fees for directly hiring this Pinnacle People employee.		
•										Important note - If an employee assigned to you is not given a 30 minute break within five (5) or six (6) hours of the		
Friday Saturday										employee's start time you will be charged break penalties.		
Sunday										CLIENT REP NAME:		
	24 HOUR CL	OCK FOR TIME	s S							TITLE:		
Breaks may be	e compulsory f	or all shifts over	five (5) or six							SIGNED: 2. TIME SUBMISSION		
break periods.		. 3								At the completion of each shift, the employee is to enter		
PERFORMAN	ICE			_				Г	1	times in nearest 5 minute intervals. For example 13:05		

p <mark>i</mark> nnacle people
TIMECULE

IIMESHEET

1. CLIENT TO SIGN THIS SECTION

CLIENT REP NAME:	
TITLE:	

2. TIME SUBMISSION

EMPLOYEE SIGNATURE COLLECTION

. EMPLOYEE TO SIGN THIS SECTION

Employee Na	ame:		Client / Venue:							
			Department / Area:							
Job Title:			Employee N	lo.:	Reporting To:					
DAY	DATE	START	MEAL FROM	BREAK 1	MEAL E	BREAK 2	FINISH	HOURS WORKED	CLIENT INITIALS	
Monday										
Tuesday										
Wednesday										
Thursday										
Friday										
Saturday										
Sunday										
PLEASE USE 24 HOUR CLOCK FOR TIMES Breaks may be compulsory for all shifts over five (5) or six (6) hours, depending on the relevant Award/EBA. Please refer to the conditions of the governing Award, Instrument or Agreement for confirmation of mandatory break periods.										
PERFORMANCE							**** Very Good		****	
CLIENT COMMENTS										
Note: Clients may prefer to email comments or feedback to their relevant State via details in the										
Please circle applicable plocation: MELBOURNE Payroll Contact: me pinnaclepeople.com. Phone: 03 8624177 Emergency: 0418 5		n.au 777	SYDNEY Payroll Contact: sydpayroll@pinnaclepeople.com.au Phone: 02 8298 3111 Emergency: 0417 727 679		BRISBANE Payroll Contact: brispayroll@ pinnaclepeople.com.au Phone: 07 3225 9999 Emergency: 0438 002 505		GOLD COAST Payroll Contact: brispay- roll@pinnaclepeople.com.au Phone: 07 5557 7111 Emergency: 0438 002 505			

	Employee is to obtain the clients initials for each day of work. At the conclusion of the last shift for the week, the employee and the client are to fill in the below approval section in points 3 and 4. Signatures must be obtained for any shift, including single shifts, and at any site.
iy- om.au	4. EMPLOYEE TO SIGN THIS SECTION

My signature verifies that I have recorded all details of these shifts accurately; including, start, finish time and breaks taken. I confirm that no injury has been sustained during the course of these shifts.

Please include any breaks and total hours worked. 3. EMPLOYEE SIGNATURE COLLECTION

Employees please note you must obtain a client's signature before your wages can be processed.

SI	G	N	E	D	٠.

FOR FURTHER INFORMATION ON OUR TERMS AND CONDITIONS, PLEASE REFER TO OUR WEBSITE

Payroll Contact: perpayroll@

Emergency: 0409 527 305

Phone: 08 9287 3888

ADELAIDE

Payroll Contact: adelpayroll@

Phone: 08 8100 7800

Emergency: 0421 544 198

PERTH

Step 1 - Take a photo of your timesheet Step 2 - Upload image of timesheet into PinnBook Step 3 - This copy to be left with the client

Phone: 02 6248 0066

Payroll Contact: actpayroll@

Emergency: 0439 100 269

CANBERRA

DARWIN

Payroll Contact: darpayroll@

Emergency: 0437 988 680

Phone: 08 8941 5000

HOBART

Payroll Contact: hobpay-

Emergency: 0428 041 118

roll@pinnaclepeople.c Phone: 03 6231 3166