

To: Horizon Recruitment Ltd
Fax: 09 9144600



CONFIRMATION OF SERVICES – Record of Hours

Designated Person: _____

Client/Company: _____

Reporting to: _____

Assignment : _____

Week ending Sunday ____ / ____ / ____

Designated Person Agreement:

I confirm that the hours shown were worked by me and I report that I have suffered no adverse medical condition during the hours worked. I will treat all work performed as strictly confidential. If I should be offered work either as a contractor or by way of temporary, casual, part-time, full-time or fixed term employment by the above named client, I agree to discuss the opportunity offered with Horizon management before acceptance.

	Date	Morning		Afternoon		Time worked *		
		Start Time	Finish Time	Start Time	Finish Time	Hours	Minutes	
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								
Hours and minutes worked this week (to nearest ¼ hour) Total:								

**Time worked is the total hours and minutes worked but does not include time taken for a meal break.*

Payments are unable to be processed unless an appropriate invoice is provided with this report.

Designated Person Signature: _____

Please leave a signed copy of this report with our client and forward the original to Horizon. To ensure payment, Horizon must receive your completed and signed record of hours no later than noon on Monday following the week worked.

Client Agreement:

The Client confirms the hours, as set out, are correct and accepts Horizon has provided these services upon the terms and conditions of its 'Agreement for Supply of Contract Staff'. If the Designated Person is offered work, either as a contractor or by way of temporary, casual, part-time, full-time or fixed term employment by the Client at any time within six months of the completion date of this work assignment, the Client agrees to pay Horizon the scale fee then applying for such an appointment.

For the client:

Name: _____

Title / Position: _____

Signature: _____