

Worker Earnings Receipt Form - For: (enter name of worker) _____

*** Use a separate sheet for each new worker

Worker completes the sections below up to 'signed'						Client completes when paying the worker				Worker must enter date and sign for money rcvd	
Enter the Day of week	Enter Date of Month	Enter your time of arrival	Enter the time you leave	Enter time Worked for	Sign to confirm work done	Wages due for work	Wages paid out now	Balance of wages due less wages paid	Money left out for wkr on....	Signed for	Date Rcvd
Day	Date	Time start	Time stop	Hrs:mins	Signed	Pay Due	Pay Paid	Balance	Date Paid		
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
21											

Verified by the client as an accurate record for this worker and the payments made

PLEASE NOTE

There is a legal requirement to keep this document for up to six years

Top copy - Client's copy
Bottom copy - Worker's copy

Signed: (Client)

Name:

Date: