

Clement May Limited
 3rd Floor, 3 London Wall Buildings
 London Wall, London
 Phone: 01737 822000
 Email: accounts_payable@clementmay.com

Contractor's Full Name:	<input style="width: 95%;" type="text"/>
Project Name/Reference No.	<input style="width: 60%;" type="text"/>
Month & Year	<input style="width: 35%;" type="text"/>

Date	hours Worked	Overtime hours Worked (if applicable)	Total hours Worked	Comments
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
Total				

Contractor	I agree that this is a true and accurate record of my claimable time.	
Print Full Name	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Signature	<input style="width: 95%; height: 40px;" type="text"/>	<input style="width: 95%; height: 40px;" type="text"/>

Project Manager	I certify that the hours and days worked as shown are true and correct and that the work has been carried out by the Consultant in a satisfactory manner.	
Print Full Name	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Signature	<input style="width: 95%; height: 40px;" type="text"/>	<input style="width: 95%; height: 40px;" type="text"/>