

Contractor Pay Sheet

Project Name: _____
Project Location: _____
Pay Period: _____
Date: _____

Contractor Details

Company Name: _____
Contact Person: _____
Phone: _____
Email: _____
Address: _____

Work Summary

Date	Description of Work	Hours Worked	Rate (\$/hr)	Total (\$)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total Amount Payable (\$):				_____

Prepared By: _____
Signature: _____
Date: _____
Approved By: _____
Signature: _____
Date: _____

Important Notes:

- Ensure all work descriptions and hours are accurately recorded before submission.
- Attach supporting documents such as timesheets or invoices if applicable.
- Authorization signatures are required for processing payment.
- This form should be retained for company records and future audits.
- Incorrect or incomplete information may cause delays in payment.