SOH501863-0001

CREDIT CONTROL: 0845 120 5335 NU	<b>FHORNE</b> Irsing Ser		License Commission for Soci	EMPT
FAX: 0117 923 9229         E-MAIL: payroll@tnsltd.com         NO VAT         No. 544316				
Name and Address of Client GOSPORT WAR MEMORIAL HOSPITAL	Quals. Worked		nt on the overall performance e during the shift	Client Initial here if booked at specialist rates Code A
GOSPORT	RGN RSCN	Excellent Very Good Good		PRINTED NAME P.M. KEEVEN
Ward or Unit DRYAD	RMN/RNMH MIDWIFE	Average Below Avera		Date
Code A	EMN/ENMH E/N		like us to contact you e above please tick	Expenses
TNS Nurse Number T3010	AUX ON CALL	Contact No.: NIGHT SIT		First part of Postcode from which journey started
DAY DATE START TIME F	FINISH TIME 24hr clock	BREAK (MINS)	FOR OFFICE USE ONLY B P1 P2	BH PLEASE NOTE: - BREAKS Unless otherwise stated on this timesheet.
Tues 17/05/05 2015 (	745	90		for shifts up to 6 hours in length no break is deducted. For shifts of 6-6%/hrs, 15 minutes. For shifts 6%-9hrs, 30 minutes. For night duty, and day shifts of more than 9hrs in length, 1 hr.
NOTES Or as agreed between Agency and Client.				
NURSES: All timesheets for the week ending Friday must be returned to the office by 12 noon Monday. Top 2 copies to be returned to office, leave back copy with client.			Nurse's Signature	Code A
Thornbury Nursing Services Ltd. Company Number 0444 2573			NMC PIN	and the second second

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