

If You Suspect Any Fraud Please  
Contact The NHS Fraud Line on:  
08702 400 100

## Weekly Timesheet

Please use a separate Timesheet for  
each ward worked on



# Professionals

1. Ward: Dryad Unit: \_\_\_\_\_ Hospital: GWMH Trust: \_\_\_\_\_ Practice: \_\_\_\_\_

Week Ending Saturday:  
7 / 5 / 05

2. Pay No. 001001600827 Code A Forenames: Code A

3. ACTUAL HOURS WORKED							8. AUTHORISATION			9. Request Number		
DATE	Start	Finish	4. Unpaid Breaks		5. Hours Worked		6. Grade	7. State F,P or G	Authorised Signature		Print Name	Date
			Hrs	Min	Hrs	Min						
SUN												
MON												
TUE												
WED												
THU												
<u>BS</u> FRI	<u>20.15</u>	<u>07.45</u>					<u>A</u>		<u>Code A</u>	<u>P. MCKEEVER</u>	<u>7.5.05</u>	<u>256204</u>
SAT												

Total Hours: \_\_\_\_\_

10. Authorising Person confirming Total Hours in words Ten Hours

**THIS TIMESHEET SHOULD BE SENT WEEKLY TO: NHS PROFESSIONALS, BERRYWOOD BUSINESS VILLAGE, TOLLBAR WAY, HEDGE END, HANTS, SO30 2UN**

11. Comments

I DECLARE THAT THE INFORMATION I HAVE GIVEN ON THIS FORM IS CORRECT AND COMPLETE  
I HAVE NOT CLAIMED ELSEWHERE FOR THE HOURS/SHIFTS DETAILED ON THIS TIMESHEET

12. Members Signature: \_\_\_\_\_

Data Input Clerks are instructed to return any Timesheets which are not completed and authorised correctly.