

NATIONAL HQ: Thornbury House,  
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National Care Standards Commission

**TIME SHEET**

**VAT EXEMPT**  
**NO VAT**

No. **456383**

Name and Address of Client <i>FOSPORT WARRIOR MEMORIAL HOSPITAL</i>	Quals. Worked	(Tick Below)	Client Initial here if booked at specialist rates	Client Signature <b>Code A</b>
	RGN		PIN	
	RSCN		PIN	
Ward or Unit <i>DRYAD</i>	RMN		PIN	PRINTED NAME .....
	RNMH		PIN	
Name of Nurse <b>Code A</b>	EMN		PIN	Date .....
	E/N		PIN	
TNS Nurse Number <i>W7892</i>	NVQ			Expenses <i>45</i> miles
	AUX	<input checked="" type="checkbox"/>		
				Area in which Nurse lives <i>SO15 7QA</i>

DAY	DATE	START TIME 24hr clock	FINISH TIME 24hr clock	BREAK (MINS)	FOR OFFICE USE ONLY			
					B	P <sub>1</sub>	P <sub>2</sub>	BH
<i>FRI</i>	<i>15.04.05</i>	<i>20.45</i>	<i>07.45</i>	<i>90</i>				
NOTES								

**PLEASE NOTE - BREAKS**  
For shifts up to 6 hours in length no break is deducted. For shifts of 6-6½hrs, 15 minutes. For shifts 6½-9hrs, 30 minutes. For night duty, and day shifts of more than 9hrs in length, 1 hr. Or as agreed between Agency and Client. All calculations to the nearest 5(five) minutes.

Nurse's Signature  
**Code A**

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.  
Thornbury Nursing Services Ltd. Company Number 0444 2573