

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: 1/RYARD. Unit: Hospital: WAR/MAM. Trust: KARIMAH / GOSPORT Practice:

Week Ending Saturday:
23 / 10 / 14

2. Pay No. 001001-600037. Surname: **Code A** Forenames: **Code A**

3. ACTUAL HOURS WORKED								8. AUTHORISATION				
DATE	Start	Finish	4. Unpaid Breaks		5. Hours Worked		6. Grade	7. State F,P or G	Authorised Signature	Print Name	Date	9. Request Number
			Hrs	Min	Hrs	Min						
SUN												
MON												
TUE												
WED												
<u>21/10</u> THU	<u>20:15</u>	<u>07:45</u>			<u>10½</u>		<u>A</u>	Code A	<u>SWHITEMAN,</u>		<u>22.10.04.</u>	<u>R/623752</u>
FRI												
SAT												

Total Hours: 10½

10. Authorising Person confirming Total Hours in words

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