

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: GWMMH Hospital: FGACT Trust: FGACT Practice:

Week Ending Saturday:  
25 / 9 / 04

2. Pay No. 001001619548 Surname: 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												
24/9 FRI	07:30	20:00	1		12	30	A	G	<u>Code A</u>	<u>L IRVINE</u>	<u>25/9/04</u>	
25/9 SAT	07:30	09:30	—		2		A	G	<u>Code A</u>	<u>L IRVINE</u>	<u>25/9/04</u>	

Total Hours: 13 1/2 hrs

10. Authorising Person confirming Total Hours in words THIRTEEN AND A HALF.

**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.