

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: war memorial Trust: Fareham & Gosport Practice: _____

Week Ending Saturday:
10 / 7 / 04

2. Pay No. NS 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												
<u>5/7/04</u> MON	<u>12:15</u>	<u>20:30</u>	<u>1/2</u>		<u>8</u>	<u>15</u>	<u>A</u>		Code A	<u>HT Russell</u>	<u>5/7/04</u>	<u>581083</u>
TUE												
WED												
THU												
FRI												
SAT												

Total Hours: 7 3/4

10. Authorising Person confirming Total Hours in words Seven and 3/4 hours HT Russell

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.