

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: G.W.M.H. Trust: fareham JGosport Practice: _____

Week Ending Saturday:
19 / 06 / 04

2. Pay No. 007001 600982 Surname: Code A Forenames: Code A

DATE	3. ACTUAL HOURS WORKED						8. AUTHORISATION			9. Request Number		
	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												
<u>16/6/04</u> WED	<u>7:30</u>	<u>13:30</u>			<u>6</u>		<u>A</u>	<u>G</u>	<u>Code A</u>	<u>F. SHAW</u>	<u>16.6.04</u>	<u>536058</u>
THU												
FRI												
SAT												

Total Hours: 6

10. Authorising Person confirming Total Hours in words Six Hours Code A

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 ELIGIBILITY 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.