NATIONAL HQ: Thornbury House, 7-9 Whiteladies Road, Clifton, Bristol BS8 1NN

PAYROLL LINE: 0845 120 5333 CREDIT CONTROL: 0845 120 5335 FAX: 0117 923 9229

CALL CENTRE: 0845 120 5305

Thornbury Nursing Services Ltd. Company Number 0444 2573



E-MAIL: payroll@tnsltd.com

Licensed by Commission for Social Inspection

TIME SHEET

## NO VAT

NMC PIN 9813797€

No. 567660

Name and Address of Client SAILEN Ward GOSPORT War memorial hospita St Annes road GOSPORT.			Quals. Worked RGN	(Tick Below)		ment on the overall performance e during the shift		Client Signature Code A			
			RSCN		Very Good				PRINTED NAME J. DUNCEAVY		
Ward or Unit SAILEN ward			RMN/RNMH		Good Average Below Average  If you would like us to contact you regarding the above please tick				Date		
3.160.	MIDWIFE										
Name of Nurse	EMN/ENMH										
rucosc	E/N		Name:								
TNS Nurse Number			AUX		Contact No.:				miles		
T3264			ON CALL		NIGHT SIT	TER			First part of	f Postcode from which journey started  Code A	
DAY	DATE	START TIME 24hr clock	FINISH TIME 24hr clock			(MINS) B	FOR OFF	ICE USE ONLY	BH	PLEASE NOTE: - BREAKS	
	08.05.05	33 oohis	0745	14	our				1	Unless otherwise stated on this timesheet, for shifts up to 6 hours in length no break is deducted. For shifts of 6-6½hrs, 15 minutes.	
night Shirt	-09.05.05									For shifts 6%-9hrs, 30 minutes. For night duty,	
NOTES										and day shifts of more than 9hrs in length, 1 hr. Or as agreed between Agency and Client.	
Age was the same and									<u>C</u>	ode 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.							Oude A				