TIMESHEET

FOR COMPLETION BY BANK MEMBER												
Please complete one timesheet for each ward worked using black pen and block capitals as per example. Altered/amended shifts will be rejected.												
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Surname: BROU	GHTON											
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Ward/Dept: DACD	PLUS.		基型型型 器									
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I declare that the information I have give	ven on this form is correct and comple	ete. I understand that if	I provide false informat	ion this may result in	震闘 医腹							
disciplinary action and I may be liable for on this timesheet. I consent to this being					Total hours							
Bank Member	Code A		Date:	2010	105							

Professionals Berrywood Business Village Tollbar Way, Hedge End Southampton, SO30 2UN Professional For payroll queries call: 02380 748313 Copies: WHITE/NHS Professionals - GREEN/Bank Member - BLUE/Trust/Ward Is recommended best financial practice for the Authorisor to send the White Copy to NHS Profession. FOR COMPLETION BY THE AUTHORISED WARD/DEPARIMENT SIGNATORY I am an authorised signatory for mad/department. I declare that the grade and shift(s) that have authorised are accurate and I approve payment. I understand that if I give false information this form action may be taken against me. Grade Worked Initial(s) and surname of Authoriser A J B R O W N Authorised Signature Code A Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date // Authorised Signature Date											100	V Islanti		Mark.	146.0	200	Dec S	946	
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Date received stamp:

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Any questionable timesheet must be immediately brought to the attention of your local Counter Fraud Specialist. Should you wish to report any case of fraud please contact, in confidence, the NHS Fraud Reporting Line on **08702 400 100**