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



E-MAIL: payroll@tnsltd.com

Licensed by Commission for Social Care Insp

TIME SHEET

NO VAT

No. 529526

Name and Address of Client Gosport wor memorial Hospital			Quals. Worked RGN	(Tick Below)	of this nurse Please tick ( Excellent Very Good	ent on the overall performance e during the shift			Client Initial here if booked at specialist rates  Client Signature Code A  PRINTED NAME. ROWE NA V. GONYALES		
Ward or Unit	RMN/RNMH		Good Average	Date 10/4/2005							
Doedalus			MIDWIFE		Below Average				The work described below has been carried out to my satisfaction. Start time and finish time were as noted below.		
Name of Nurse			EMN/ENMH	*	If you would like us to contact you regarding the above please tick						
Code A			E/N		Name: Contact No.:				Expenses		
TNS Nurse Number			AUX	V					First part of Postcode from which journey started		
T2848			ON CALL		NIGHT SITTER						
DAY	DATE	START TIME 24hr clock	FINISH TIME 24hr clock			FOR OFFIC		E USE ONLY	Y BH	PLEASE NOTE: - BREAKS	
Sinday	10/4/05	13:20	20.30	30						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. For shifts 6½-9hrs, 30 minutes. For night duty, and day shifts of more than 9hrs in length, 1 hr.	
NOTES										Or as agreed between Agency and Client.	
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.						Nurse's Signature  Code A					
Thornbury Nursing Services Ltd. Company Number 0444 2573						NMC PIN					