## 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



1. Ward: Daredolus			Unit: Hospi					tal:		Trust: Practice	Week Ending S		aturday:
2. Pay No.			Surname:						Forena	mes:			, _,_
०००२००। ६०५५५			Code A					Code A	19	1 3	105		
		3. ACTUAL HOURS WORKED								8. AUTHORISATION			
DATE		Start	Finish	4. Unpa Breal		5. Hours Work		6. Grade	7. State F,P or G	Authorised Signature	Print Name	Date	9. Request Number
	SUN							1		The state of	200		
2000	MON		13 (14 (14 (14 (14 (14 (14 (14 (14 (14 (14		1								
	TUE						754						
	WED		mark.	*						0			
17/3/05	THU	1300	1930	15		6	15	-/		Code A	BJ. Lumsgew	17/3/5	1146908
18/3/25	FRI	1300	煙			85,50		1					H48915
	SAT			d <sub>k</sub>									
Total Hours: 6 1/4 10. Authorising Person confirming Total Hours in words Six Hours Fifteen Minute THIS TIMESHEET SHOULD BE SENT WEEKLY TO: NHS PROFESSIONALS, BERRYWOOD BUSINESS VILLAGE, TOLLBAR WAY, HEDGE END, HANTS,													
11. Com	A.P. GOVERNOR		OFFICET 3	HOOLI	JES	EIVI VV	ORMATION I HAVE GIVEN ON THIS FORM IS EWHERE FOR THE HOURS/SHIFTS DETAILE	CORRECT AND CO	MPLETE 2				

WHITE COPY - NHS PROFESSIONALS YELLOW COPY - WARD/DEPT. **BLUE COPY - NURSE** 

**General Enquiries: Timesheet Enquiries:** Tax/Pension Enquiries: 02392 894340

01489 772400 01489 772422

12. Members Signature:

PLEASE SEE TIMESHEET COMPLETION NOTES OVERLEAF

Code A

Data Input Clerks are instructed to return any Timesheets which are not completed and authorised correctly.