

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: **DAEDALUS** Unit: Hospital: **GOSPORT WAR MEMORIAL** Trust: **Fareham & Gosport P.C.T.** Practice:

Week Ending Saturday:

12 / 06 / 2004

2. Pay No. **NEW STARTER** 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	-	-	-	-	-	-	-	-	-	-	-	-
8/6/04 TUE	13:00	20:30	0	15	7	15	A	G	Code A	ME BAKER	8/6/04	582030
WED												
THU												
FRI												
SAT												

Total Hours: **7 Hrs 15 min**

10. Authorising Person confirming Total Hours in words **SEVEN HOURS AND FIFTEEN MINUTES** **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 ELSEWHERE 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.