

## TRUEBLUE NURSES – Timesheet

NAME:

WEEK ENDING (date):

JOB TITLE:

CARERS SIGNATURE:

Please email or fax your timesheet by Friday [tbntimesheets@gmail.com](mailto:tbntimesheets@gmail.com) Fax: 441372239000

	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
<b>DATE:</b>							
<b>START TIME:</b>							
<b>FINISH TIME:</b>							
<b>BREAK:</b>							
<b>START TIME:</b>							
<b>FINISH TIME:</b>							
<b>TOTAL HOURS WORKED (minus breaks):</b>							

CLIENT NAME:

CLIENT SIGNATURE:

I confirm that I am authorised to sign on behalf of the above name Client. I confirm that the Job Title and the hours/dates listed above are accurate and I therefore approve payment. I understand and agree to Trueblue Nurses Terms of Business that a standard introductory fee will be charged if the carer named above is taken on as a member of staff.