

TIMESHEET

TIMESHEETS MUST BE AT THE OFFICE BY 10am ON A MONDAY TO GUARANTEE PAYMENT



Property (one timesheet per property):	Address:
Candidate Name:	Candidate Signature: by signing this you agree to the declaration 1.1 below
Role:	

Day	Date (DD/MM/YYYY)	Start (24hr Clock)	Break	Finish (24hr Clock)	Total Hours to be paid	Sleep in (please tick)	Client Name	Signature <small>by signing this you agree to the declaration 1.2 below</small>	Date
<i>Example</i>	<i>15/11/2019</i>	<i>0800</i>	<i>30mins</i>	<i>2000</i>	<i>11.5</i>		<i>Nicki Knight</i>	<i>NK</i>	<i>15/11/2019</i>
Monday									
Tuesday									
Wednesday									
Thursday									
Friday									
Saturday									
Sunday									

1.1 Counter fraud declaration to be signed and dated by the Temporary Worker:

"I declare that the information I have given on this form is correct and complete and that I have not claimed elsewhere for the hours/shifts detailed on this timesheet. I understand that if I knowingly provide false information this may result in disciplinary action, and I may be liable to prosecution and civil recovery proceedings. I consent to the disclosure of information from this form for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud"

1.2 "I am an authorised signatory for my organisation. I am signing to confirm that the role, date, hours/shift that I am authorising are accurate and I approve payment. I understand that if I knowingly provide false information this may result in disciplinary action, and I may be liable to prosecution and civil recovery proceedings. I consent to the disclosure of information from this form for the purpose of verification of this claim and the investigation, prevention, detection and prosecution of fraud" I understand that the use of Temporary staff provided by us will be deemed an acceptance of our Terms of Business and charge rates. Should a current or former member of our temporary staff be engaged by an employer, whether for a limited or unlimited period, either during the booking or within a period of 6 months from the termination date of the temporary assignment, the employer will notify us and pay a Permanent Staff engagement fee in accordance with our scale of fees.

Please email your timesheets to: info@breezehealthcare.co.uk

Payroll Team contact information: Mitcheldean Covert, Birmingham, B14 5XN, UK | +44 7831540708