

Please use CAPITAL Letters

TIME SHEET

Procare Living Limited

1 Meridian South, Meridian Business Park, Leicester, LE19 1WY

0333 577 2299

www.procareliving.co.uk

timesheets@procareliving.co.uk

First Name		REFERENCE NUMBER (optional)
Surname		COPIES: Top Copy – your copy (send PdF or photo to us) Bottom Copy – Unit or Ward/ Home (placement)
	Where have you been working?	
Unit/Ward/Home		

MONDAY	START	FINISH	BREAK	TOTAL HOURS	WAKING NIGHT?	manager's signature
D D M M Y Y						
TUESDAY	START	FINISH	BREAK	TOTAL HOURS		
D D M M Y Y						
WEDNESDAY	START	FINISH	BREAK	TOTAL HOURS		
D D M M Y Y						
THURSDAY	START	FINISH	BREAK	TOTAL HOURS		
D D M M Y Y						
FRIDAY	START	FINISH	BREAK	TOTAL HOURS		
D D M M Y Y						
SATURDAY	START	FINISH	BREAK	TOTAL HOURS		
D D M M Y Y						
SUNDAY	START	FINISH	BREAK	TOTAL HOURS		
D D M M Y Y						
		TOTAL WEEK	KLY HOURS:			

YOUR SIGNATURE: I can confirm that the above hours are correct and that I performed my duties to the best of my ability.	MANAGER'S SIGNATURE: I can confirm that the (above) has completed the above hours. I am authorised within my position to sign this time sheet.			
Date: D D M M Y Y	Full Name:	Date: D D M M Y Y		
Signature:	Position:	Signature:		

A copy of this time sheet needs to be with us by 10am Monday, so that we can pay you on time. To send your time sheet, email a scan or photo to <u>timesheets@procareliving.co.uk</u> or pop into the office and say hello. If you are going to email a scan or photo across, we recommend that you CC yourself on the email. If you see your email in your inbox, it means we also should have received it.