



Timesheet For The Month Of

Employer's Name:	Employee's Name:
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IMPORTANT - COMPLETION NOTES, PLEASE READ:
 Enter Rate of Pay = Enter the appropriate hourly rate of pay.
 Hours for Payment = Record the number of hours worked in the columns below. Please take care to ensure that the hours are entered under the correct date and Rate of Pay column.
 Holiday = Enter 'H' for Holiday in the Holiday Indicator column against the relevant date. Also record the number of hours holiday that are to be paid in the appropriate Rate of Pay columns. Please ensure that your employee has not exceeded their holiday entitlement, and record the holiday on your Personal Assistant Holiday Form provided.
 Sickness = If your employee is absent from work due to illness, enter 'Sick' in any column against every date that they are ill.

Prodisability must receive the hours for payment a minimum of 7 working days before your pay date.

	Holiday Indicator	Hours for Payment	Hours for Payment	Hours for Payment	Hours for Payment		Holiday Indicator	Hours for Payment	Hours for Payment	Hours for Payment	Hours for Payment
Enter Rate		@ £	@ £	@ £	@ £	Enter Rate		@ £	@ £	@ £	@ £
1st						16th					
2nd						17th					
3rd						18th					
4th						19th					
5th						20th					
6th						21st					
7th						22nd					
8th						23rd					
9th						24th					
10th						25th					
11th						26th					
12th						27th					
13th						28th					
14th						29th					
15th						30th					
						31st					

Checked and Authorised for Payment:	TOTAL
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Employee's Signature:	Date:
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Employer's Signature:	Date:
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Please keep this timesheet for your records, or if returning to Prodisability, then please make sure that all the columns are completed and a summary form is attached.