



Newton Hall
 Town Street
 Newton
 Cambridge, CB22 7ZE
Tel: 01223 928880
FAX: 01223 772233

Email: timesheets@mjchealthsolutions.co.uk

Week Ending: ____/____/20

Name: _____

Job Title: _____

Candidate No: _____

Client Name: _____

IMPORTANT

When completing this timesheet please ensure that you list your hours by day shift and night shift.
 Day rates are from 08h00 - 20h00 and night rates 20h00 - 08h00 e.g. 15h00 - 23h00 will be day rates from 15h00 - 20h00 (5 hours) and night rates 20h00 - 23h00 (3 hours)
 Payroll queries should be emailed to payroll@mjchealthsolutions.co.uk
 Payroll office number is 01223 772071

Day	Start Time	End Time	Break Start	Break End	Day	Night	Total Hours Worked
					Shift HRS	Shift HRS	
Monday (Day)							
Monday (Night)							
Tuesday (Day)							
Tuesday (Night)							
Wednesday (Day)							
Wednesday (Night)							
Thursday (Day)							
Thursday (Night)							
Friday (Day)							
Friday (Night)							
Saturday (Day)							
Saturday (Night)							
Sunday (Day)							
Sunday (Night)							
Bank Holiday (Day)							
Bank Holiday (Night)							

TOTAL HOURS

Client's signature: _____ Designation: _____

Candidate signature: _____ Date: _____