

# Locum Timesheet

Locum Name: \_\_\_\_\_  
Speciality/Profession: \_\_\_\_\_  
Grade: \_\_\_\_\_  
Place of Work: \_\_\_\_\_  
Department: \_\_\_\_\_  
Reporting To: \_\_\_\_\_  
ID Number: \_\_\_\_\_



www.thelocumagency.co.uk  
enquiries@thelocumagency.co.uk

## Total Hours Worked

Day	Date	Start Time	Finish Time	Lunch	Total Hours
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
Weekly Total					

As the locum, I declare that the above are the total hours I have worked.

\_\_\_\_\_  
Locum Signature                      \_\_\_/\_\_\_/\_\_\_  
Date

\_\_\_\_\_  
Locum Print Name

As authorising signatory, I declare that the above are the total hours to be invoiced.

\_\_\_\_\_  
Client Authorised Signature                      \_\_\_/\_\_\_/\_\_\_  
Date

\_\_\_\_\_  
Client Print Name

## Travel Claims

Petrol/Travel Claims	Total Claims
<b>Petrol Claim:</b> Miles Travelled: _____ at £ _____ per mile	
<b>Other Travel:</b> _____	
Weekly Total	

As the locum, I declare that the above is the total travel claimed.

\_\_\_\_\_  
Locum Signature                      \_\_\_/\_\_\_/\_\_\_  
Date

As authorising signatory, I declare that the above is the total travel to be invoiced.

\_\_\_\_\_  
Client Authorised Signature                      \_\_\_/\_\_\_/\_\_\_  
Date