

### 4 WEEKLY PAYROLL TIMESHEET

### For period ending 9th February 2024 (Period 12)

**Name of Employer**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Week** | **Member of staff**  | **Hours****worked** | **Rate of****pay** | **Holiday****(number of hours taken)** | **From** | **To** | Sick hours | From | **To** |
| From 13/01/2024 to 19/01/2024 |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| From 20/01/2024 to 26/01/2024 (Due this date) |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| From 27/01/2024 to 02/02/2024 |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| From 03/02/2024 to 09/02/2024 |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

Please return to:

**Direct Payments**

Authorised by: …………………………………………………………….… (Employer) Date: ……………………………. **The People First Conference Centre**

**People First cannot process without a signature Milbourne Street**

**Carlisle**

Adjustments / Notes ……..……………...……………………………………..

………………………………………………………………………………………

##### CA2 5XB

**timesheets@wearepeoplefirst.co.uk**