**Personal Health Budget**



|  |  |  |  |
| --- | --- | --- | --- |
| Client Name: |  | Purple Ref No.: |  |
| Employer Name: |  | Employer Signature: |  |
| Employee Name: |  | Employee Signature: |  |

I, the employer, can confirm that this is a correct record of the hours worked by my employee for the period detailed. I authorise Purple to process payment and calculate the necessary HMRC payroll based on this information.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | **Weekdays** | **Nights/Weekends** |  |  |  |  |  |  | **Weekdays** | **Nights/Weekends** |  |  |
|  | **Day** | **Date** | **Hours** | **Rate** | **Hours** | **Rate** | **Annual Leave** | **Off Sick** |  |  | **Day** | **Date** | **Hours** | **Rate** | **Hours** | **Rate** | **Annual Leave** | **Off Sick** |
| **Week 1** | **Mon** |  |  |  |  |  |  |  |  | **Week 3** | **Mon** |  |  |  |  |  |  |  |
| **Tue** |  |  |  |  |  |  |  |  | **Tue** |  |  |  |  |  |  |  |
| **Wed** |  |  |  |  |  |  |  |  | **Wed** |  |  |  |  |  |  |  |
| **Thu** |  |  |  |  |  |  |  |  | **Thu** |  |  |  |  |  |  |  |
| **Fri** |  |  |  |  |  |  |  |  | **Fri** |  |  |  |  |  |  |  |
| **Sat** |  |  |  |  |  |  |  |  | **Sat** |  |  |  |  |  |  |  |
| **Sun** |  |  |  |  |  |  |  |  | **Sun** |  |  |  |  |  |  |  |
| **Week 2** | **Mon** |  |  |  |  |  |  |  |  | **Week 4** | **Mon** |  |  |  |  |  |  |  |
| **Tue** |  |  |  |  |  |  |  |  | **Tue** |  |  |  |  |  |  |  |
| **Wed** |  |  |  |  |  |  |  |  | **Wed** |  |  |  |  |  |  |  |
| **Thu** |  |  |  |  |  |  |  |  | **Thu** |  |  |  |  |  |  |  |
| **Fri** |  |  |  |  |  |  |  |  | **Fri** |  |  |  |  |  |  |  |
| **Sat** |  |  |  |  |  |  |  |  | **Sat** |  |  |  |  |  |  |  |
| **Sun** |  |  |  |  |  |  |  |  | **Sun** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  | **Total** |  |  |  |  |  |  |  |