Caring Family Supports,INC. Monthly Timecard DECEMBER 2023 \*for questions call office @ (818)564-4108 Deliver no later than 1/1/2024 @ 12:00 PM BY:

E-Mail: timesheets@caringfamilysupports.org OR TEXT (213)304-2699 OR FAX (213)896-7033

EMPLOYEE NAME:\_

**CLIENT NAME:** 

RESPITE CARE:							
	TIME IN	TIME OUT	TOTAL	OFFICE USE			
FRI,12/1							
SAT,12/2							
SUN,12/3							
MON,12/4							
TUE,12/5							
WED,12/6							
THU,12/7							
FRI,12/8							
SAT,12/9							
SUN,12/10							
MON,12/11							
TUE,12/12							
WED,12/13							
THU,12/14							
FRI,12/15							
SAT,12/16							
SUN,12/17							
MON,12/18							
TUE,12/19							
WED,12/20							
THU,12/21							
FRI,12/22							
SAT,12/23							
SUN,12/24							
MON,12/25							
TUE,12/26							
WED,12/27							
THU,12/28							
FRI,12/29							
SAT,12/30							
SUN,12/31							
TOTAL							

DAY CA	RE/I	P.A:						onth.
DATE	TIME IN	TIME	TIME IN	TIME	TOTAL	OFFICE USE		of every month NOON PST. Late time sheets will be paid next month.
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SAT,12/30							ver	tim
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SUN,12/31							<u> </u>	
TOTAL								

I declare, under perjury, that the above listed hours were worked by me for the and sustained no injury this work period. I took all appropriate meal breaks and re	
Employee Signature:	Date:
I confirmed that the above total hours are accurate and the Caring Family Supposatisfaction.	orts, INC. care provider performed their duties as outlined to my
Parent Signature:	Date: