Caring Family Community Services

## **Timesheet and Payday Report**

STAFF NAME

(print)

## PAYDAY DATE

CURRENT CASELOAD (use second sheet if needed)

CHILD'S NAME (Do not use parent's name)	SERVICE (Therapist mentor, BA, etc.)	Current Referral Source (CMO's, VO, YCM's, Mobile, etc.)	Date of Last contact with Referral source	End Date of Current Auth Period	# of hours assigned per week	Hours for this pay day	Current Hourly Rate	Total Pay

Date of last Supervision

Total Pay for this pay period

## CLOSED CASES (PLEASE LIST FOR PREVIOUS 30 DAYS)

CHILD"S NAME	Last Referral Source	Date of last contact with Referral source	Date Closed- Discharged	I would like (Cire	
			-	YES	NO
				-	

This Timesheet and Payday Report is <u>due on the 10<sup>th</sup> and the 25<sup>th</sup></u> of each month. Payday is the 15<sup>th</sup> and the last day of each month. All documentation (progress notes, services records, intake forms, etc.) for the child receiving services should accompany this report in order for payroll to be processed in a timely manner. Failure to fill out this Timesheet and Payday Report completely or failure to forward documentation of service delivery may cause a delay in processing your payroll and therefore a delay in your check (or direct deposit).