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AK30

26_Weekly Time Sheet Format_80515_sample_TR.xls

FLORIDA CDC+ WEEKLY TIMESHEET

CDC+ Consumer Directed Care Plus

apd agency for persons with disabilities State of Florida

Employee:	Evita Employee	Employee ID Number	1 2 3 4 5 6
Consumer	Caroline Consumer	Consumer ID Number	1 2 3 4 5 6 7
Consumer/Representative contact information if APD has questions:	Phone #: xxx-xxx-xxxx	Email:	xxxxxxxxxxxx@xxxxxxx.xxx

Plan Sections
R = Services Section
S = Savings Plan
T = Short Term Expenditures

Year: 2008 From Monday, 6/16 through Sunday, 6/22

Date Worked Mo	Date Worked Day	Service Code	Enter Plan Section	Back Up	Time In H H M M AM PM	Time OUT H H M M AM PM	Time In H H M M AM PM	Time OUT H H M M AM PM	Total Hrs. Worked	①	②	③	
06	16	032	R	N	0 7 0 0 AM	0 9 1 5 AM	0 8 0 0 PM	0 9 3 0 PM	3.75	32	R	N	3.75
06	16	011	R	N	0 2 0 0 PM	0 5 0 0 PM			3.00	11	R	N	6.00
06	17	032	R	Y	0 8 0 0 AM	1 0 0 0 AM			2.00	32	R	Y	2.00
06	20	011	R	N	0 2 0 0 PM	0 5 0 0 PM			3.00				
06	21	046	S		0 6 0 0 PM	1 0 0 0 PM			4.00	46	S		4.00
06	22	046	T		0 4 0 0 PM	1 0 0 0 PM			6.00	46	T		6.00
		①	②	③									

Service Code Totals:													
	#	32R	3.75	#	11R	6.00	#	46T	6.00	#			
	#	32RE	2.00	#	46S	4.00	#			ALL	21.75	=	21.75

This is required information Live-in Employee: Yes: No: X

Evita Employee	6/22/2008	Caroline Consumer	6/22/2008

You are purchasing services against an approved budget. Every line on your Purchasing Plan is an authorization, so you must account for your spending according to how you have been authorized to spend.

Sheet1 / Sheet2 / Sheet3

Ready

start C:\Documents and Se... Microsoft Excel 4:41 PM Sunday 6/8/2008