

EMPLOYEE NUMBER: _____

MAMRE TIMESHEET – SUPPORT WORKER

(CURRENT FROM 16.06.2008)

EMPLOYEE NAME: _____

DSW FULL TIME / PPT

FORTNIGHT ENDED: _____

	Mon /	Tues /	Wed /	Thurs /	Fri /	Sat /	Sun /	Mon /	Tues /	Wed /	Thurs /	Fri /	Sat /	Sun /
Start AM														
Finish AM														
Sub-total														

Start PM														
Finish PM														
Sub-total														

Sleepover														
Dist. 1 st hr														
Dist. 2 nd hr														
On Call														

Leave Hrs														
Leave Type														
Total														

Family's Name: _____

Family's Signature: _____ / /

Employee's Signature: _____ / /

Key Worker's Name: _____

Key Worker's Signature: _____ / /

TRAVEL ALLOWANCE

Travel: _____ kms

Trip details: _____

Please circle engine size:

up to 1600cc 1601-2600cc over 2600cc

TOTAL HOURS WORKED FOR FORTNIGHT: _____

Total Hrs _____

C\F Toil _____

Sub Total _____

Stand Hrs _____

Toil Bal _____

PAYROLL USE ONLY			
ORD	65	TRAVEL	47 48 49
A6	70	AL & LOAD	60 61
W/E	77	SICK	66
S/O	76	OT 1.5	12
DIST 1	71	BACKPAY	91
DIST 2	72	HD	94

<p>NEWMARKET Fax: 3622 1244 40 Finsbury Street, Newmarket 4051</p>	<p>← FORWARD TO KEY WORKER →</p>	<p>MT GRAVATT Fax: 3291 5877 1428 11-14 Logan Rd, Mt Gravatt 4122 PO Box 949, Mt Gravatt 4122</p>
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JOB NO: _____ Higher Duties at PAY LEVEL: _____

Notes: _____