



# ATTENDANCE SHEET

195 Montague Street, 4th Floor  
 Brooklyn, NY 11201  
 Tel: (718) 780-8700 Fax: (718) 222-1316

Name of TWU Member: \_\_\_\_\_

Name of School/ Provider: \_\_\_\_\_

TWU Member Pass #: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Name of child: \_\_\_\_\_

Address: \_\_\_\_\_

Tel: \_\_\_\_\_

Fax: \_\_\_\_\_

**PLEASE LIST ONLY THE HOURS THAT OUR VOUCHER COVERS.**

JULY 2022						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
____ FROM - ____ TO <b>26</b>	____ FROM - ____ TO <b>27</b>	____ FROM - ____ TO <b>28</b>	____ FROM - ____ TO <b>29</b>	____ FROM - ____ TO <b>30</b>	____ FROM - ____ TO <b>1</b>	____ FROM - ____ TO <b>2</b>
____ FROM - ____ TO <b>3</b>	____ FROM - ____ TO <b>4</b>	____ FROM - ____ TO <b>5</b>	____ FROM - ____ TO <b>6</b>	____ FROM - ____ TO <b>7</b>	____ FROM - ____ TO <b>8</b>	____ FROM - ____ TO <b>9</b>
____ FROM - ____ TO <b>10</b>	____ FROM - ____ TO <b>11</b>	____ FROM - ____ TO <b>12</b>	____ FROM - ____ TO <b>13</b>	____ FROM - ____ TO <b>14</b>	____ FROM - ____ TO <b>15</b>	____ FROM - ____ TO <b>16</b>
____ FROM - ____ TO <b>17</b>	____ FROM - ____ TO <b>18</b>	____ FROM - ____ TO <b>19</b>	____ FROM - ____ TO <b>20</b>	____ FROM - ____ TO <b>21</b>	____ FROM - ____ TO <b>22</b>	____ FROM - ____ TO <b>23</b>
____ FROM - ____ TO <b>24</b>	____ FROM - ____ TO <b>25</b>	____ FROM - ____ TO <b>26</b>	____ FROM - ____ TO <b>27</b>	____ FROM - ____ TO <b>28</b>	____ FROM - ____ TO <b>29</b>	____ FROM - ____ TO <b>30</b>
____ FROM - ____ TO <b>31</b>	____ FROM - ____ TO <b>1</b>	____ FROM - ____ TO <b>2</b>	____ FROM - ____ TO <b>3</b>	____ FROM - ____ TO <b>4</b>	____ FROM - ____ TO <b>5</b>	____ FROM - ____ TO <b>6</b>

TWU Member's Signature: \_\_\_\_\_

Provider's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**\* TWU MEMBER ORIGINAL Attendance Sheets are due the 15th of the following month in our office. NO LATER!**

**Attendance sheets must be mailed or dropped in the Childcare Fund mailbox outside of the glass office door. DO NOT FAX OR EMAIL!**

**WEEKLY BILLING SCHEDULE:**

Attendance Sheet Month

Period (From/To)

Weeks

JULY  
 AUGUST

07/03/2022 - 07/30/2022  
 07/31/2022 - 09/03/2022

4  
 5

**FOR BOOKKEEPING USE ONLY:**

INVOICE DATE: \_\_\_\_\_

MONTHLY CONTRACTED AMOUNT: \$ \_\_\_\_\_

GROSS AMOUNT: \$ \_\_\_\_\_

INVOICE #: \_\_\_\_\_

WEEKLY CONTRACTED AMOUNT: \$ \_\_\_\_\_

FICA AMOUNT: \$ \_\_\_\_\_

NET AMOUNT: \$ \_\_\_\_\_