



# 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.**

OCTOBER 2019						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
____ 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>

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!**

**ORIGINAL ATTENDANCE SHEET MUST BE MAILED OR WALKED IN. DO NOT FAX!**

**WEEKLY BILLING SCHEDULE:**

Attendance Sheet Month	Period (From/To)	Weeks
OCTOBER	09/29/2019 - 11/02/2019	5
NOVEMBER	11/03/2019 - 11/30/2019	4
DECEMBER	12/01/2019 - 12/28/2019	4
JANUARY	12/29/2019 - 02/01/2020	5
FEBRUARY	02/02/2020 - 02/29/2020	4
MARCH	03/01/2020 - 03/28/2020	4
APRIL	03/29/2020 - 05/02/2020	5
MAY	05/03/2020 - 05/30/2020	4
JUNE	05/31/2020 - 06/27/2020	4
JULY	06/28/2020 - 08/01/2020	5
AUGUST	08/02/2020 - 08/29/2020	4

**FOR BOOKKEEPING USE ONLY:**

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

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

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

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

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

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

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