

## FLORIDA CDC+ WEEKLY TIMESHEET



Employee:											Employee ID Number											R =			n Se es S		ons ion		
Consumer:												Consumer ID         S = Savings Plan           Number         T = Short Term Expenditu													res				
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Year: From Monday,													th	rou	gh :	Sun	ıday,												
<u>Date</u> Worked		Service	Enter Plan	Back Up		:	<u>Tim</u>	ıe II	<u>1</u>		Ī	Γime	<u>) Ol</u>	<u>JT</u>				Time IN					Time OUT					Total	Hrs.
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Service Code #			# _				#					#																	
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This is required information: Live-in Employ											ree:	:	Ye	s:			No	): 				_					_		
											ete.	Consumer/Representative Signature Date e. (Signatures of both employee and consumer/representative are required.)																	
NOTE: 1. You													e en	nploy	ee n	nust	t live	with	the	consu	ime	r or	stay	/ OVE	ernig	ht dı	uring	the cour	se of

<sup>2.</sup> The CDC+ work week is from 12:00 AM (midnight) on Monday to 11:59 PM on Sunday.

<sup>3. \*</sup>The consumer/representative is responsible for entering the Section of the Purchasing Plan in which the employee's services are budgeted. If budgeted in Services, enter R; if budgeted in Savings, enter S; if budgeted in the Short Term Expenditures section, enter T.

<sup>4.</sup> The consumer/representative is responsible for entering a Y or N in the Back Up column if the employee is working as an Emergency Back Up (EBU) provider based on the approved Purchasing Plan that covers this work week. EBUs are only budgeted in the Services Section.