



ABN 26 078 078 258

# TEMPORARY STAFF TIMESHEET New South Wales Aged Care

Client name ..... Support worker name ..... Week ending .....

Kilometres											Office use only Shift Type		
Client Name	Service (as per below codes)	Day	Date	Start Time	Finish Time	Break	Total Hours	Odometer Start	Odometer Finish	Total KMS	DAY	Sat/Sun	P/Hol

Service Type: PC - Personal Care | SS - Social Support | DA - Domestic Assistance

Please complete and submit by 10am each Monday - email [agedcare.nsw@mcARTHUR.com.au](mailto:agedcare.nsw@mcARTHUR.com.au) or fax: 02 9277 7001

Client signature ..... Support worker (employee) signature .....