Community Living Network

Effective June 1 , 2015

Pay periods are the 1st-15th and the 16th-end of month. Timesheets are due by the 3rd (period of 16-31st) and 18th (period of 1st-15th) of each month. Paydays are the 15th and 30th of each month. Bank's Stop Check fee is $30 (paid by employee). Timesheets need to be signed by both the Employee and Employer after each pay period. You are required to stay within the allowed budgeted hours for the Employer, otherwise those hours won't be paid by CLN.

Employer of Record: _____ Phone Number _____

Personal Assistant: _____

Phone Number: _____ CMH Agency: _____

CLS

CLS HOURS ONLY			
Date (mm/dd/yy)	Time IN (hh:mm A/P)	Time OUT (hh:mm A/P)	Total Time (hh:mm)
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
		Total Hours Worked	

Respite

RESPITE HOURS ONLY			
Date (mm/dd/yy)	Time IN (hh:mm A/P)	Time OUT (hh:mm A/P)	Total Time (hh:mm)
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
/ /	:	:	:
		Total Hours Worked	

Training

Date	Training Class Name	Time IN	Time OUT	Total
/ /		:	:	:
/ /		:	:	:
/ /		:	:	:
			Total Hours	

Must include confirmation of passing the training to be paid

Training

Signatures Required

Employer/Representative of Record: _____ Date

Personal Assistant: _____ Date

CLN Administration:

CLS _____ Res _____ Training _____ CLS Hldy _____ Res Hldy _____

Mail or Drop to:
CLN, 301 W. Michigan Ave Suite 102 Ypsilanti, 48197 Fax: 734-482-3894 Email: Timesheets@communityalliance.com