

## September 2016

CHILD NAME: \_\_\_\_\_

PARENT NAME: \_\_\_\_\_

PROVIDER NAME: \_\_\_\_\_

DATE	DAY	PARENT SIGNATURE	TIME IN	AM/PM	STAFF INITIAL	PARENT SIGNATURE	TIME OUT	AM/PM	STAFF INITIAL
		FIRST & LAST NAME				FIRST & LAST NAME			
9/1/2016	THU								
9/2/2016	FRI								
9/3/2016	SAT								
9/4/2016	SUN								
9/5/2016	MON								
9/6/2016	TUE								
9/7/2016	WED								
9/8/2016	THU								
9/9/2016	FRI								
9/10/2016	SAT								
9/11/2016	SUN								
9/12/2016	MON								
9/13/2016	TUE								
9/14/2016	WED								
9/15/2016	THU								
9/16/2016	FRI								
9/17/2016	SAT								
9/18/2016	SUN								
9/19/2016	MON								
9/20/2016	TUE								
9/21/2016	WED								
9/22/2016	THU								
9/23/2016	FRI								
9/24/2016	SAT								
9/25/2016	SUN								
9/26/2016	MON								
9/27/2016	TUE								
9/28/2016	WED								
9/29/2016	THU								
9/30/2016	FRI								

If it is discovered that this information is false, you may be prosecuted for fraud. It is against the law to receive child care or be reimbursed by submitting false information. Please check that days, time in/out & signatures reported, match the attendance verification forms.

I verify that the information on this sign in/out sheet is correct.

\_\_\_\_\_  
Parent(s) Signature and Date

\_\_\_\_\_  
Provider(s) Signature and Date