|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Staff’s Name:** | |  | | **Month:** |  | | | **Year:** | |  | |
|  | | | | | | | | | | | |
| **Date** | **Item Description**  **(Cleaning Tasks Provided)** | | | | | **Client’s Name (First & Last)** | | | | | **Total**  **Staff Hours** |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
|  |  | | | | |  | | | | |  |
| **1 UNIT = 60 Minutes of Staff Time** | | | | | | **Monthly Total (Staff Hours):** | | | | |  |
|  | | | | | | | | | | | |
| **Staff’s Signature:** | | |  | | | | **Date Signed:** | |  | | |
| **Supervisor’s Signature:** | | |  | | | | **Date Signed:** | |  | | |