



SIP PAYROLL ALLOCATION TIME SHEET 2009 WEEK 1 AND 2

(This time sheet is to be faxed (604) 528 - 6174 OR Email to jessica@cdbrabc.ca on completion of hours)

Name of Parent/Guardian: _____

Name of Child/Youth: _____

Hours assigned per week: _____

Number of weeks assigned: **9**

Total hours assigned for summer: _____

	Hours	Hours
Intervenor's Name(s)	July 6 - 12, 2009 (Week 1)	July 13 – 19, 2009 (Week 2)
Total Hours:		

Parent / Guardian Signature: _____

Intervenor's Signature: _____

Week 1 & 2 must be faxed or emailed in by **July 20th** and will be deposited on **July 24th**
 Weeks 3 & 4 must be faxed or emailed in by **August 3rd** and will be deposited on **August 7th**
 Weeks 5 & 6 must be faxed or emailed in by **August 17th** and will be deposited on **August 21st**
 Weeks 7 & 8 must be faxed or emailed in by **August 31st** and will be deposited on **September 4th**
 Weeks 9 must be faxed or emailed in by **September 14th** and will be deposited on **September 18th**
 Record of Employment and T4 will be mailed at the end of the summer

Payment of Intervenors

Please fax these payroll sheets in on a bi-weekly basis. It is the responsibility of the **Intervenor** to fax in these sheets in a timely manner to ensure you get paid. **Fax all forms to 604.528.6174.**

In order for payments to be accurately deposited in a timely basis it is critical that, Peter Ganske (604-552-2665) be contacted immediately of any changes.