

PERSONAL ASSISTANT TIME SHEET (DPF2)

Name of Direct Payment User: _____

Name of Personal Assistant: _____

Normal Personal Assistants Weekly Hours: _____

Date 12 Week Period Commences: _____

Date	MON hrs worked	TUE hrs worked	WED hrs worked	THUR hrs worked	FRI hrs worked	SAT hrs worked	SUN hrs worked	TOTAL hrs worked	Employee Signature
								TOTAL	

Date	MON hrs worked	TUE hrs worked	WED hrs worked	THUR hrs worked	FRI hrs worked	SAT hrs worked	SUN hrs worked	TOTAL hrs worked	Employee Signature
								TOTAL	

Date	MON hrs worked	TUE hrs worked	WED hrs worked	THUR hrs worked	FRI hrs worked	SAT hrs worked	SUN hrs worked	TOTAL hrs worked	Employee Signature
								TOTAL	

Signature: _____ **(Individual/Suitable Person/Nominated Person)**

Date: _____

Please complete this form and return this with all other return forms and bank statements etc.

Email: Direct.payments@darlington.gov.uk

Post to Direct Payment Team, Room 306, Town Hall, Darlington DL1 5QT

**IF YOU NEED ASSISTANCE IN COMPLETING ANY OF THE PAPERWORK PLEASE CONTACT
THE DIRECT PAYMENT TEAM TEL: 01325 406111**