 HEALTHEAST PER DIEM TIME KEEPING RECORD – PRN/DAILY REGISTRY USE ONLY cid:image001.jpg@01CEE054.282F8280

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| **DAY OF THE WEEK (Mon, Tues, Wed, Thurs,**  **Fri, Sat, Sun)** | **DATE WORKED** | **TIME IN** | **MEAL BREAK OUT** | **MEAL BREAK IN** | **TIME OUT** | **ENTITY**  Bethesda  St John’s  St. Joe’s  Woodwinds | **UNIT WORKED** (if floating to multiple units, enter each unit and associated time as separate line items) | **TOTAL HOURS** | **AUTHORIZED SIGNATURE** |
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**Instructions to Employee**

* Work week is Monday - Sunday. A separate time keeping record must be kept for each week
* Complete all sections of time record slip
* Client must sign for each date worked (charge RN or supervisor)
* Worker must provide this document to your employer to be uploaded
* Time must be entered after the end of your shift if you work Sunday eve/noc or by Monday 8am CT