

PERSONAL ASSISTANT TIMESHEET

Service User: _____

Employee Name: _____

POA / Guardian: _____

IF APPLICABLE

Employee Signature: _____

Authorised Signature: _____

WEEK 8 2025/26

Week Commencing	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Total
12-Apr-25	12	13	14	15	16	17	18	
19-Apr-25	19	20	21	22	23	24	25	
26-Apr-25	26	27	28	29	30	1	2	
03-May-25	3	4	5	6	7	8	9	
PLEASE NOTE: BOXES ABOVE ARE FOR WORKED HOURS ONLY								Total Hours Worked

SDS FUNDED		ILF FUNDED		RESPIRE		PAID LEAVE	
HOURS		HOURS		HOURS		SICK WITH PAY (SWP) SDS ONLY	
SLEEPOVERS		SLEEPOVERS		SLEEPOVERS		SICK WITH PAY S/O (SWP) SDS ONLY	
HOLIDAY HOURS		HOLIDAY HOURS				RETAINED WITH PAY (RWP)	
SLEEPOVER HOLIDAYS		SLEEPOVER HOLIDAYS				ABSENT WITH PAY (AWP)	

IMPORTANT INFORMATION

PERIOD START
DUE TO AILN OFFICES
OFFICIAL PAY DATE
EMAIL ADDRESS
POST ADDRESS

SATURDAY 12-Apr-25
MONDAY 12-May-25
FRIDAY 16-May-25
TIMESHEETS@AILN.ORG
Ayrshire Independent Living Network
The Michael Lynch Centre for Enterprise
71 Princes Street, Ardrossan, KA22 8DG

NOTES

Please ensure that all timesheets for personal assistants are sent together, or sent with a note that there are more to be received.