



Month:

December 2022

Provider Name: _____

Child Name: _____

Day	Date	AM In	AM Out	Signature	PM In	PM Out	Signature
Thu	12/1						
Fri	12/2						
Sat	12/3	*	*	*	*	*	*
Sun	12/4	*	*	*	*	*	*
Mon	12/5						
Tue	12/6						
Wed	12/7						
Thu	12/8						
Fri	12/9						
Sat	12/10	*	*	*	*	*	*
Sun	12/11	*	*	*	*	*	*
Mon	12/12						
Tue	12/13						
Wed	12/14						
Thu	12/15						
Fri	12/16						
Sat	12/17	*	*	*	*	*	*
Sun	12/18	*	*	*	*	*	*
Mon	12/19						
Tue	12/20						
Wed	12/21						
Thu	12/22						
Fri	12/23						
Sat	12/24	*	*	*	*	*	*
Sun	12/25	*	*	*	*	*	*
Mon	12/26						
Tue	12/27						
Wed	12/28						
Thu	12/29						
Fri	12/30						
Sat	12/31	*	*	*	*	*	*

Parent Signature: _____

Provider Signature: _____