

HOURS WORKED LOG BOOK

Practitioner Name: DAVOREN, Christopher

Reference Number: MED0000098641

To be completed and forwarded to the Board as requested.

Please complete each column. In 'hours worked' please indicate *actual* hours worked not rostered hours, in 24 hour format, for example 0800 – 1700.

Date	Start Time	Break Start	Break End	End of Shift	Supervisor Name	Supervisor Signature	Practitioner Signature
02-01-2019	07:35	13:35	13:45	19:00			
03-01-2019	07:55	N/A	N/A	11:25			
03-01-2019	12:55	N/A	N/A	16:50			
04-01-2019	07:10	11:45	12:10	21:10			
07-01-2019	06:40	12:45	13:10	16:10			
08-01-2019	07:25	13:40	14:00	16:30			
09-01-2019	07:10	11:35	11:45	16:15			
10-01-2019	07:05	12:25	12:45	17:20			
11-01-2019	07:00	13:55	14:15	16:55			
14-01-2019	07:55	11:50	12:05	16:30			
19-01-2019	08:00	N/A	N/A	12:15			

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Date	Start Time	Break Start	Break End	End of Shift	Supervisor Name	Supervisor Signature	Practitioner Signature
20-01-2019	07:55	12:45	13:10	16:05			
21-01-2019	07:20	12:40	12:50	16:55			
22-01-2019	08:05	14:00	14:25	16:05			
25-01-2019	08:05	13:40	13:50	19:50			
27-01-2019	06:55	13:55	14:10	20:10			
28-01-2019	11:50	17:00	17:15	22:35			
29-01-2019	12:10	17:10	17:30	21:50			
30-01-2019	11:55	16:45	17:00	23:25			
31-01-2019	12:00	18:05	18:25	22:25			