

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
03-08-2020	07:40	12:20	12:45	16:10			
04-08-2020	07:40	13:10	13:35	16:20			
05-08-2020	07:20	12:55	13:05	16:10			
06-08-2020	07:25	13:10	13:35	16:30			
07-08-2020	07:50	13:15	13:25	16:30			
10-08-2020	07:45	13:35	13:55	17:05			
11-08-2020	07:40	13:05	13:20	16:15			
12-08-2020	07:40	12:45	12:55	16:50			
13-08-2020	03:30	N/A	N/A	04:50			
13-08-2020	08:15	N/A	N/A	02:20			
14-08-2020	07:45	12:40	13:00	17:15			

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Date	Start Time	Break Start	Break End	End of Shift	Supervisor Name	Supervisor Signature	Practitioner Signature
17-08-2020	07:35	14:05	14:25	18:00			
18-08-2020	06:50	12:15	12:30	17:15			
19-08-2020	06:40	13:15	13:40	17:10			
20-08-2020	07:10	13:45	14:00	17:10			
21-08-2020	07:20	13:25	13:50	17:45			
24-08-2020	08:00	13:40	13:55	17:55			
25-08-2020	08:15	12:20	12:40	16:15			
26-08-2020	06:45	13:20	13:45	17:10			
27-08-2020	06:50	13:40	13:55	17:45			
28-08-2020	05:55	13:35	13:45	18:10			
31-08-2020	06:50	13:10	13:30	16:55			