



Bethania
Lutheran
School

CASUAL EMPLOYMENT PAYMENT CLAIM Teachers and Aides

Complete this form for all casual teacher and aide work. Fill in one form per type of work performed.

Last name:	First name:
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Type of work performed:	Fortnight Ending:
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Date	Start Time	End Time	Hours	No. of Duties	Staff Member Replaced

I declare that the information provided on this form is true and correct.

Signature:	Date:
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Approval use

Position:	Signature:
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Payroll use:

Name and Signature:	Date Processed:
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