

Invoice form – TO BE COMPLETED BY YOUR WORKER(S)

This form is to be submitted when you have privately hired a personal support worker. Ask each worker to complete a separate invoice form. Attach the completed Invoice form(s) to the POS form (as shown on page 5).

Only **four** items need to be completed on this form. They are: the worker's information, details about the service provided, the worker's signature, and the date.

Example of Invoice form:



FAMILY SERVICE TORONTO
For People. For Change.

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Passport Invoice Form

To be completed by a worker and attached to the Purchase of Service Form.

Client information:		Service Provided By:	
Family Code:		Last Name:	
Name:		First Name:	
Address:		Address:	
Phone number:		Phone number:	

TYPE OF SERVICE (I.E. Support worker, Respite, Tutor)	DATE FROM (DD/MM/YYYY)	DATE TO (DD/MM/YYYY)	QUANTITY (HRS)	RATE (\$/hr)	TOTAL AMOUNT (\$0.00)
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
TOTAL:					\$

By signing this form, I acknowledge I am 18 years of age or older, I have provided services as detailed above, and I am not a primary caregiver of the client listed above.

Worker Signature

Date

Date Received:



Passport Invoice Form

To be completed by a worker and attached to the Purchase of Service Form.

Client information:	
Family Code:	
Name:	
Address:	
Phone number:	

Service Provided By:	
Last Name:	
First Name:	
Address:	
Phone number:	

TYPE OF SERVICE (I.E. Support worker, Respite, Tutor)	DATE FROM (DD/MM/YYYY)	DATE TO (DD/MM/YYYY)	QUANTITY (HRS)	RATE (\$/hr)	TOTAL AMOUNT (\$0.00)
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
TOTAL:					\$

SAMPLE

By signing this form, I acknowledge I am 18 years of age or older, I have provided services as detailed above, and I am not a primary caregiver of the client listed above.

Worker Signature

Date

Date Received: