



**NORTH SHORE  
DISABILITY  
RESOURCE  
CENTRE**

**Receipt for Hours Worked**  
Summer Bursary

This receipt must be completed by the worker and returned to our office for reimbursement, once they have completed working for you. Deadline for submitting receipts is **September 15**.

I, \_\_\_\_\_, received \$ \_\_\_\_\_  
(PRINT name of worker) (\$ amount received)

from \_\_\_\_\_ for assisting \_\_\_\_\_  
(PRINT parent's name) (PRINT child's name)

**Hours:**

A. Number of hours worked per day: \_\_\_\_\_

B. Total number of hours worked during the summer: \_\_\_\_\_

**Financial:**

A. Amount paid per hours: \$ \_\_\_\_\_

B. Total amount received: \$ \_\_\_\_\_

Name of Worker (please print): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

**Let's build better communities.**

3158 Mountain Highway  
North Vancouver BC V7K 2H5

**NSDRC.ORG**