**Daisy Hill and Southside Family Day Care ABN: xxxxxxxxx**

104 Chatswood Rd **CCB Approval ID: x-xxxxx**

 **Educator Statement**

Period: 31/07/2017 – 13/08/2017 (this is the fortnight period the statement is for)

No. of year to date absence the child has

The amount of CCR you have received for the child

The amount of CCB you have received for the child

Total hrs for the week

Scheme levy 1.40 p/h x no. hrs

Your p/h fee x no. hrs

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 06/08/2017 | John Smith | 145JV98 | 192.50 | 38.50 | 27.50 | 00:0 | 95% | 149.78 | 00.0 | 00.0 | 34.52 | 0.00 | No | 15 | 46.70 |
| 06/08/2017 | Penny Folds | 168BK75 | 245.00 | 49.00 | 35 | 0.00 | 100% | 200.66 | 0.00 | 0.00 | 39.67 | 0.00 | No | 6 | 53.67 |
| **Week Totals:** | **437.50** | **87.50** | **62.50** |  |  | **350.44** |  |  | **74.19** |  |  |  | **100.37** |
| **Educator Levy:** | **31/07 – 13/08** | **66.00** |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Zoe Nielsen** |  |  |  | **Hours** |  |  | **Subsidy** |  |  |  |  |
| **Week Ending** | **Child Name** | **Enrolment ID** | **Full Fee** | **Family Levy** | **Std Hours** | **Non Std hours** | **CCB%** | **CCB**  | **SCCB** | **JET** | **CCR** | **ISS** | **School Child** | **YTD Absence** | **Fee Charged** |
| 06/08/2017 | John Smith | 145JV98 | 192.50 | 38.50 | 27.50 | 00:0 | 95% | 149.78 | 00.0 | 00.0 | 34.52 | 0.00 | No | 15 | 46.70 |
| 06/08/2017 | Penny Folds | 168BK75 | 245.00 | 49.00 | 35 | 0.00 | 100% | 200.66 | 0.00 | 0.00 | 39.67 | 0.00 | No | 6 | 53.67 |
| **Week Totals:** | **437.50** | **87.50** | **62.50** |  |  | **350.44** |  |  | **74.19** |  |  |  | **100.37** |

Fee that the parent pays you per week

The total amount of CCR you received for the week

The total amount of CCB you received for the week

The child’s CCB percentage

This is the educator levy of $33.00 per week so $66.00 for 2 weeks

|  |  |
| --- | --- |
| Subsidies Due |  $849.26 (The total amount of CCR/CCB received for all families for the fortnight) |
| Levies | $241.00 (The total amounts of family levies and educator levies charged for the fortnight) |
| Adjusted Subsidies | $00.00 (if any adjustments were made these will appear here) |
| Adjusted Levies | $00.00 |
| **Payment Due** | **$608.26** (This is what you will receive from us in your bank account. It is the total subsidies due – levies) |

Total amount you’re receiving directly from families per week