

Company
Letterhead

Attendance Report

CBO Name: [insert name of organization]
Invoice Number: [insert invoice number]
School/District: [insert school and district]
Report Period: [insert dates]
Activity: [insert name of activity/program]
Teaching Artist(s): [insert name of staff]

Date	Present	Absent
[insert date]	[insert number]	[insert number]
Total Days: [insert number]		

CERTIFICATION: I certify that services listed on this attendance documentation and the corresponding invoice have been completed

Signature of Principal or Authorized Designee

Date _____

Print Name

Title

Location