HOMEMA	KER Ti	me and	d Activ	ity Doc	ument	ation			TIMESH	EETS ARE	DUE BY 4:3	BOPM MON	DAY AFTE	R WEEK 2	
WEEK 1 of pay period	MON	TUE	WED	THU	FRI	SAT	SUN	WEEK 2 of pay period	MON	TUE	WED	THU	FRI	SAT	SUN
Month/Day/Year								Month/Day/Year							
VISIT ONE								VISIT ONE							
TIME IN	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	TIME IN	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
TIME OUT	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	TIME OUT	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
Visit 1 Hours:								Visit 1 Hours:							
VISIT TWO								VISIT TWO							
TIME IN	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	TIME IN	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
TIME OUT	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	TIME OUT	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
Visit 2 Hours								Visit 2 Hours							
		Total your	daily hou	rs in the b	oxes belo	W				Total your o	daily hours	in the box	es below		
Total Daily Hrs:								Total Daily Hrs:							
WEEK 1		HMKR	Wk 1 Total	hours:				WEEK 2		HMKR Wk 2 Total hours:					
Activities								Activities							
Tidy Bathroom								Tidy Bathroom							
Vacuum								Vacuum							
Make Bed								Make Bed							
Dust								Dust							
Sweep								Sweep							
Мор								Мор							
Wash Dishes								Wash Dishes							
Take Out Trash								Take Out Trash							
Change Linens								Change Linens							
Run Errands								Run Errands							
Laundry								Laundry							
Other (note on back)								Other (note on back)							
completed time she accurate and that th	et for accura ne services v	acy before sig vere perform	gning. It is a ed as specif	federal crime ied in the PC	e to provide : CA Care Plan	false informa . I certify and	ition on PCA l d swear unde	must draw a line thro billings for Medical A r penalty of law that l d face criminal prose	ssistance pay I have accurat	ment. Your sig	nature verific	es the time a	nd services e	entered above	are
Print Recipient Na	me				MA Membe	r# or DOE	3	You mus	st initial car	es provided	l. Do not pr	e-fill or pro	e-sign/date	timesheets	
					1					41.7.1	, ,			A	

Every date box must have month/day/year for entire timesheet & include AM/PM notation Recipient/Responsible Party Signature: Date: Incomplete, incorrect, or illegible timesheets cannot be accepted for billing. **Total Hours** Bemidji (office use) P: 320-233-0119 PCA Provider # (office use) Print PCA Name F: 320-233-0129 HOMECARE Date: PCA Signature Late timesheets will not be processed until the next payroll cycle (2 more weeks) Dates & location of client stay in hospital or care facility or incarceration:

Narrative, if applicable:		2023 Pay Periods and Pay Days						
, , , , , , , , , , , , , , , , , , , 	Charting is due every other MONDAY by 4:30 PM , after week 2 is over. Payday is FRIDAY.							
	Pay P	Pay Period			<u>T/s Due</u> <u>Payday</u>			
	12/12/2022	-	12/25/2022	12/26/2022	1/6/2023			
	12/26/2022	-	1/8/2023	1/9/2023	1/20/2023			
	1/9/2023	-	1/22/2023		2/3/2023			
	1/23/2023	-	2/5/2023		2/17/2023			
	2/6/2023	-	2/19/2023		3/3/2023			
	2/20/2023	-	3/5/2023		3/17/2023			
	3/6/2023	-	3/19/2023		3/31/2023			
	3/20/2023	-	4/2/2023		4/14/2023			
	4/3/2023	-	4/16/2023		4/28/2023			
	4/17/2023	-	4/30/2023	I	5/12/2023			
	5/1/2023	-	5/14/2023		5/26/2023			
	5/15/2023	-	5/28/2023		6/9/2023			
	5/29/2023	-	6/11/2023		6/23/2023			
	6/12/2023	-	6/25/2023		7/7/2023			
	6/26/2023	-	7/9/2023		7/21/2023			
	7/10/2023	-	7/23/2023					
	7/24/2023	-	8/6/2023		8/18/2023			
	8/7/2023	-	8/20/2023		9/1/2023			
	8/21/2023	-	9/3/2023		9/15/2023			
	9/4/2023	-	9/17/2023		9/29/2023			
	9/18/2023	-	10/1/2023		10/13/2023			
	10/2/2023	-		10/16/2023				
	10/16/2023	-		10/30/2023				
	10/30/2023	-		11/13/2023				
	11/13/2023	-		11/27/2023	12/8/2023			
	11/27/2023	-		12/11/2023				
	12/11/2023	-		12/25/2023	1			
	12/25/2023	-	1/7/2024	1/8/2024	1/19/2024			