

# KS WORK Biweekly Timesheet

1. Participant Name

2. Participant Identification Number

     

3. Personal Care Assistant (PCA) Name

4. PCA Identification Number

     

5.a. Service Period

From						To					
m	m	d	d	y	y	m	m	d	d	y	y

5.b. Service Code

N	I	G	H	T
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Tired of paper forms?  
Visit [www.Palcofirst.com](http://www.Palcofirst.com) to register  
for online time entry **TODAY!**

For instructions on completing the  
timesheet, visit [www.palcofirst.com](http://www.palcofirst.com)

## 5.d. Services Provided

### Week One

	Time In		AM ○ PM ○	Time Out		AM ○ PM ○	Hours	
	h	m		h	m		h	m
Sunday								
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
<b>Total Hours - Week One</b>								

### Week Two

	Time In		AM ○ PM ○	Time Out		AM ○ PM ○	Hours	
	h	m		h	m		h	m
Sunday								
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
<b>Total Hours - Week Two</b>								

6.a. Personal Care Assistant Signature

6.b. Date

7.a. Employer Signature

7.b. Date

Your signature confirms the information provided above is complete and accurate

Timesheets are due to Palco by 12:00 p.m. CST on the Tuesday after the end of the Pay Period.

Fax: 1-877-859-8757.

Email: [timesheets@palcofirst.com](mailto:timesheets@palcofirst.com) Mail: P.O. Box 242930, Little Rock, AR 72223