

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

S	U	P	E	M
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Tired of paper forms?
Visit www.Palcofirst.com to register
for online time entry **TODAY!**

For instructions on completing the
timesheet, visit 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										
Total Hours - Week One										

Week Two

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

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 Mail: P.O. Box 242930, Little Rock, AR 72223