

Veteran-Directed Home and Community-Based Services (VD-HCBS)

Veteran/Employer printed name \_\_\_\_\_

Caddo Council on Aging

Employee printed name \_\_\_\_\_

**Timesheet & Service Log for PCA/Homemaker**

Month/Year: \_\_\_\_\_

DATE (circle)	IN-TIME	OUT-TIME	DAILY TOTAL # OF HOURS PC/HM	Personal Care Tasks											Homemaking Tasks																	
				Assist w/trans- fers	Assist walking or w/c	Med Remind/ Assist	Assist w/ eating	Oral Care	Bath/ Shower	Wash Hair	Comb Hair	Shave	Dress/ Assist Dress	Inconti- nence Care	Toilet- ing	Shopping/ Errands	Meal Prep	Clean Bath- room	Clean Kitchen	Sweep/ Mop Floors	Vacuum Carpet	Dust	Laundry	Clean/Ch ange Linens	Transpor- tation	Other						
1	16																															
2	17																															
3	18																															
4	19																															
5	20																															
6	21																															
7	22																															
8	23																															
9	24																															
10	25																															
11	26																															
12	27																															
13	28																															
14	29																															
15	30																															
	31																															
<b>TOTAL HOURS THIS PERIOD</b>																																

Verification of Accuracy: Employer (or Representative): \_\_\_\_\_  
 Signature Date

Employee: \_\_\_\_\_  
 Signature Date

*Please turn in SIGNED timesheets at end of each pay period to Caddo Council on Aging, 1700 Buckner Street, Suite 240, Shreveport, LA 71101. FAX: 318-676-7911*