

Instructions for Timesheet Completion
MUST USE BLUE OR BLACK INK ONLY
PLEASE CHECK BEFORE SUBMITTING TIMESHEETS

*** Heading**

- <Enter Employer Name (consumer) and Employer Name (attendant).
- <Enter correct Payroll Period, mm/dd/yy.
- <Answer Hospital Question, yes or no.

***Time in/out**

- <Enter correct dates for each day, mm/dd/yy.
- <Enter Time in/Out, **INDICATE IF IT IS AM/PM.**
- <Total the Hours worked per day.

***Daily Tasks**

- <Make sure that the tasks are checked according to the Plan of Care.

***Signatures**

- <The consumer and attendant **BOTH** have to sign each day worked.

***Total for Pay Cycle**

- <Total the Hours worked for the Pay Period.

IMPROPER OR INCOMPLETE TIME SHEETS WILL BE RETURNED!

All original copies of timesheets *have* to be submitted to BAILS. Keep yellow carbon copy for your records in the attendant folder.

Bootheel Area Independent Living Services

Attn: Payroll
P.O. Box 326
Kennett, MO. 63857

Phone: 573-888-0002

Note: Each personal care attendant must use his/her own timesheet. It cannot be shared between workers.

***Remember!** If you have any questions, please do not hesitate to contact our Payroll Clerk or your Case Manager.