COOMBS COMPASSIONATE HOME CARE AGENCY INC. TIMESHEET CELL PHONE USE IS PERMITTED IN THE CLIENT'S HOME FOR EMERGENCIES ONLY

CLIENT:	(print)
	CLIENT:

PERIOD WORKED: January 14-27, 2024

DAY	DATE	SHIFT #1 START	SHIFT #1 END	SHIFT #2 START	SHIFT #2 END	SHIFT # 3 START	SHIFT # 3 END	HOURS WORKED
Sunday	14	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Monday	15	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Tuesday	16	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Wednesday	17	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Thursday	18	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Friday	19	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Saturday	20	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
							TOTAL HOURS WK #1	
Sunday	21	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Monday	22	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Tuesday	23	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Wednesday	24	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Thursday	25	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Friday	26	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Saturday	27	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
							TOTAL HOURS WK #2	
				TOTAL H	IOURS WOR	KED WK #1	and WK #2	

E ' 1								
Friday	19	□am	□am	□am	□am	□am		
C . 1	20	□pm	□pm	□pm	□pm	□pm	-	
Saturday	20	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
		1	1	1	1	1	TOTAL	
							HOURS WK #1	
Sunday	21	□am	□am	□am	□am	□am	□am	
		□pm	□pm	□pm	□pm	□pm	□pm	
Monday	22	□am	□am	□am	□am	□am		
		□pm	□pm	□pm	□pm	□pm	□pm	
Tuesday	23	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
*** 1 1	2.4	-	-	-			-	
Wednesday	24	□am □pm	□am □pm	□am □pm	□am □pm	□am □pm		
Thursday	25	□am	□am	□am	□am	□am	_	
Thursday	25	□am □pm	□pm	□pm	□am □pm	□am □pm		
Friday	26	□am	□am	□am	□am	□am	_	
1 11day	20	□pm	□pm	□pm	□pm	□pm		
Saturday	27	□am	□am	□am	□am	□am	□am	
		□pm	□pm	□pm	□pm	□pm	□pm	
							TOTAL	
							TOTAL HOURS WK #2	
				TOTAL F	IOURS WOR	RKED WK #1	HOURS WK #2	
		RE:			IOURS WOR	RKED WK #1	HOURS WK #2	
I certify that I	have work		sted during thi	s pay period.			HOURS WK #2 and WK #2	
I certify that I HSW'S SIGN One timesheet	have work	ted the hours lis	sted during thi	s pay period. SUPER' orked each da	VISOR'S SIG y. Email, fax,	SNATURE:_ or deliver you	HOURS WK #2 and WK #2	on the Sunday fol
I certify that I HSW'S SIGN One timesheet the end of the	have work NATURE: t per client pay period	ed the hours list.	sted during thi actual hours w	s pay period. SUPER' orked each da Monday will r	VISOR'S SIG y. Email, fax, esult in a dela	SNATURE:_ or deliver you	HOURS WK #2 and WK #2	
I certify that I HSW'S SIGN One timesheet the end of the FIMESHEET	have work NATURE: t per client pay period TS MUST	Record only and Timesheet's i	actual hours we received after	s pay period. SUPER' orked each da Monday will r	VISOR'S SIG y. Email, fax, esult in a dela	SNATURE:_ or deliver you	HOURS WK #2 and WK #2	
I certify that I HSW'S SIGN One timesheet the end of the FIMESHEET EMAIL: Tin	have work NATURE: t per client pay period TS MUST nesheets(a)	Record only and Timesheet's a	actual hours we received after BY THE CLI	s pay period. SUPER orked each da Monday will r ENT AND HS	VISOR'S SIG y. Email, fax, esult in a dela SW.	SNATURE: or deliver you y in pay.	and WK #2 and timesheets of	on the Sunday fol