

Dream Home Care LLC EIN: 852330219 Phone: 717-431-4083

Address: 951 Rohrerstown Rd, STE 205, Lancaster, PA 17601.

Timesheet

Duty #	Duty Completed	Duty #	Duty Completed
115	Meal Preparation	131	Bowel Incontinence
116	Housework/Chore	132	Personal Care
117	Managing Finances	134	Bathing
118	Managing Medications	137	Lotion/Ointment
119	Shopping	138	Laundry
120	transportation	139	Reading/Writing
122	Hygiene	140	Supervision/Coaching/Cuing
123	Dressing Upper	141	Incontinence Care
124	Dressing Lower	142	Catheter Care
125	Locomotion	143	Wound Care
126	Transfer	144	G-Tube Feeding
127	Toilet Use	201	In-Person Support
128	Bed Mobility	202	Support Via Telephone
129	Eating	203	Other
130	Bladder Incontinence	204	Hair Care

Date Of Service: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Missed Clock in  Missed Clock Out  Both

Reason: \_\_\_\_\_

Service Location: \_\_\_\_\_

Participant Name: \_\_\_\_\_ Participant Medicaid ID # \_\_\_\_\_

Participant signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I certify that the signature above indicates that this time adjustment request form is true and accurate representation of service provided to the consumer. I understand that I'm solely responsible for any falsification which could be prosecuted per state and federal regulations. \*DCW Initial: \_\_\_\_\_**

DCW Name: \_\_\_\_\_ DCW Signature: \_\_\_\_\_

Date: \_\_\_\_\_ DCW SSN: \_\_\_\_\_

**Office Use Only**

Authorized By: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_