



Caretech, Inc. Time Report

P.O. Box 670
Boys Town, NE 68010

CODE _____
SERVICE ITEM _____

EMPLOYEE NAME _____

CLIENT NAME _____

PAY PERIOD

AUTHORIZED HOURS

Date	IN AM/ PM	OUT AM/ PM	TOTAL HOURS	CLIENT'S SIGNATURE	Codes: A, B, CA, D, E, F, H, L, M, MA, MW, S, TO
PAY PERIOD TOTALS					

Employee Signature

Reviewed and Approved By (Office Use)

(A=Ambulation, B=Bathing/Personal Hygiene, CA=Communication Assistance, D=Dressing, E=Errands, F=Financial Help, H=Housekeeping, L=Laundry, M=Meal Preparation/Feeding, MA=Medication Reminders (Cannot give/set up meds), MW=Minor Wound Care, S=Supervision, TO=Toileting Assistance.)



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