

# PCS Provider Timesheet/Weekly Progress Notes



Weekending \_\_\_\_\_

Pay week runs Sunday – Saturday. Timesheets are due by noon each Monday.

Idaho Falls  
208-524-3634

**Employee Name:** \_\_\_\_\_

Fax 1-877-854-9612

**Client Name:** \_\_\_\_\_

**Or email to:**

**Progress Notes/Observations/Changes:**

IFPayroll@247Prosolutions.com

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Date	Start Time	End time	Total Hours	Employee Initial Injury Free	Client Initial Hours Correct

By signing this timesheet below, I certify that I have worked the documented hours on this timesheet and have sustained no injuries.

\_\_\_\_\_

Employee Signature

\_\_\_\_\_

Date

By signing this timesheet, I certify that the hours reported on this timesheet are accurate and subject to billing.

\_\_\_\_\_

Client Signature

\_\_\_\_\_

Date

- X – Services provided
- R – Services Refused
- A – Assisted

Date	Grooming/ Oral Care	Bathing	Dressing	Meal Preparation	Eating/ Serving	Shopping/ Errands	Toileting	Transfers	Ambulate	House Cleaning	Medication	Supervision