



## TRUE CARE PROFESSIONALS FLA, LLC

1375 Gateway Blvd, Boynton Beach, FL 33426 - Tel 561-767-4355 / Fax 561-767-4356  
 Email: truecare@tcpfla.com

Client (Print) \_\_\_\_\_ Address: \_\_\_\_\_

Employee Name (Print) \_\_\_\_\_ HHA \_\_ HM\_\_ PCSP \_\_ Companion \_\_\_\_

DAY	DATE	START TIME	END TIME	TOTAL HOURS	CLIENT SIGNATURE	OFFICE USE ONLY
MON						
TUE						
WED						
THUR						
FRI						
SAT						
SUN						
<b>Total Hours</b>						

TASK		MON	TUE	WED	THUR	FRI	SAT	SUN
<b>Vital Signs</b>	Temperature							
	Blood Pressure							
	Pulse							
	Respiration							
<b>Bath / Mobility</b>	<b>USE GAITH BELT</b>							
	Tub / Shower							
	Bed-Partial / Complete							
	Assist Bath-Chair							
	Shampoo & Comb Hair							
	Mouth Care							
	Shave / Electric __ Straight __							
Assist with Dressing								
<b>Hand / Foot Skin Care</b>	Clean / File Nails							
	Soak Feet							
	Moisture Skin							
<b>Meals</b>	Prepare							
	Feed							
	Setup							
	Other Oral Supplement							
<b>Elimination</b>	Perineal Care							
	External Cath Care							
	Measure Cath Output							
	Empty Drainage Bag							
<b>Housekeeping</b>	Change Bed Linens							
	Make Bed							
	Straighten Room							
	Laundry							
	Shopping							
<b>Other Duties</b>								

I hereby certify that I worked the hours shown above at the facility named above. I understand if I alter and submit unsigned time sheet it will be returned to me without a paycheck. I recognize the right of True Care Professionals Inc., as my employer and I agree not to be employed by the client named above for a period of 90 days following my termination..

*Outdated Time Sheet of more than 4 (four) weeks will not be honored*