IHSS Timesheet

It’s important to follow the instructions when filling out the timesheet.

1. Use black ink only and press firmly. Numbers must be readable.
2. Do not send any other documents with the timesheet.
3. Only write in the hours, minutes, signature, and date boxes. Do not write in any box with a preprinted 0. Any extra writing on the timesheet can delay your paycheck.
4. You will not be paid for hours claimed more than the recipient’s IHSS Program authorized hours.
5. You must enter hours for each day worked (Total line is optional).
6. You and your Recipient must sign and date the back of your timesheet.
7. Do not fold the timesheet. Do not use white out or correction tape on timesheet.

I declare that the information on this timesheet is true and correct. I understand that any false claim may be prosecuted under Federal and State laws and that if convicted of fraud, I may also be subject to civil penalties.

Recipient’s Signature Date Provider’s Signature Date
All timesheets must be signed by both the recipient and provider.
This section has information with provider and recipient names including the case and provider numbers. The dates for this timesheet are also listed. Please note that the recipient’s monthly authorized hours are now reflected on the timesheet.
The timesheet is organized by weeks. The dates not included in this pay period are indicated by the zeros.
The total amount of time worked for each week is recorded in these sections. This Total Line is optional for the provider’s use.
Filling out the IHSS Time Sheet

Make sure you have a way to keep track of the hours you have worked. It is a good idea to use a calendar for this.
When filling out the timesheet write in the time you worked for each day as shown.
Do the same for every week using the times you recorded on your calendar.
The partial week will be entered as shown below. The remaining days of that week will be entered in the next timesheet.

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Provider #: 00000000
Provider Name: LASTNAME, FIRST
Case #: 00 01 000000
Recipient Name: LASTNAME, FIRST
Type: IHSS
Timesheet No: 0000000000
Pay From: 11/16/2014
Pay To: 11/30/2014
Hours:
Follow the instructions on the timesheet.

Timesheets must be signed by both the recipient and provider.

Timesheets are organized by weeks. Dates not included in this pay period are indicated by the zeros.

Ensure you have a way to track the hours you have worked (i.e., Calendar).

When filling out the timesheet write the time you worked for each day. This should reflect the hours you have been tracking.