

CHATSORTH  
21615 PLUMMER ST SOMETHING WAY ROAD ST 1  
CHATSORTH CA 91311

**IN-HOME SUPPORTIVE SERVICES (IHSS)  
INDIVIDUAL PROVIDER  
TIMESHEET**

Record your daily hours and minutes like these samples.

FIRST, LASTNAME  
17830 SHERMAN WAY SOMETHING DRIVE APT 17  
RESEDA CA 91335-3398

Did not work	H	H	M	M
6 hours 30 minutes	H	6	3	0
4 hours 45 minutes	H	4	4	5
10 hours	1	0	M	M
<b>Total</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>5</b>

**Important Instructions**

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.

----- Cut along dotted line -----

<b>Provider #:</b> 000000000	<b>Provider Name:</b> LASTNAME, FIRST
<b>Case #:</b> 00 01 0000000	<b>Recipient Name:</b> LASTNAME, FIRST
<b>Type:</b> IHSS	<b>Timesheet No:</b> 0000000000
<b>Pay From:</b> 11/16/2014	<b>Pay To:</b> 11/30/2014
<b>Hours:</b> HHH:MM	

S 16	H	H	M	M	S 23	H	H	M	M	S 30	H	H	M	M	S	0	0	0	0
M 17	H	H	M	M	M 24	H	H	M	M	M	0	0	0	0	M	0	0	0	0
T 18	H	H	M	M	T 25	H	H	M	M	T	0	0	0	0	T	0	0	0	0
W 19	H	H	M	M	W 26	H	H	M	M	W	0	0	0	0	W	0	0	0	0
T 20	H	H	M	M	T 27	H	H	M	M	T	0	0	0	0	T	0	0	0	0
F 21	H	H	M	M	F 28	H	H	M	M	F	0	0	0	0	F	0	0	0	0
S 22	H	H	M	M	S 29	H	H	M	M	S	0	0	0	0	S	0	0	0	0

Total \_\_\_\_\_ Total \_\_\_\_\_ Total \_\_\_\_\_ Total \_\_\_\_\_

Turn over and sign. →



1. 請只使用黑色墨水並在書寫時用力壓下。號碼必須是可閱讀的。
2. 請勿和工時單一起發送任何其他文件。
3. 只在小時，分鐘，簽名和日期方匣子內書寫。切勿在任何有預先打印"0"的方匣子上書寫。任何在工時單多餘的書寫可導致延遲你的薪水。
4. 你不會被支付高出領取者的IHSS計劃授權的時數。
5. 你必須填寫每一天的工作時數（"總計"一行是選項）
6. 你和你的領取者必須在工時單的背頁簽名並註明日期。
7. 請勿摺疊工時單。切勿在工時單上使用白色塗改液或修正帶。

----- Cut along dotted line -----

***Detach Instructions Before Mailing.***

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.

我聲明在這時間表的資料是真實和正確的.我明白任何偽造的申請會被聯邦和州法律所檢控,而且如果詐騙罪名成立,我可能也將受到民事處罰.

Recipient's Signature	Date	Provider's Signature	Date

**Mail Detached Timesheet To:  
IHSS Timesheet Processing Facility • PO Box 272862 • Chico, CA 95927-2862**