




DAILY VISIT NOTE FORM / TIMESHEET

CLIENT NAME: Carter Hawkins

Employee: Lillian Obrien

DAY	Monday	Wednesday	Tuesday	Monday	Tuesday	Sunday	Saturday	
Date	09/08/25	09/08/25	09/08/25	09/08/25	09/08/25	09/08/25	09/08/25	
Time In	12:00 PM	12:00 PM	12:00 PM	12:00 PM	12:00 PM	12:00 PM	12:00 PM	
Time Out	12:00 PM	12:00 PM	12:00 PM	12:00 PM	12:00 PM	12:00 PM	12:00 PM	
Bathing		X			X		X	
Dressing	X		X	X		X	X	
Toileting			X		X		X	
Standby assist	X				X		X	
Cleaning body	X	X	X	X			X	
Toweling off	X	X	X	X	X	X	X	
Laundry		X	X	X			X	
Linen changes	X	X			X	X	X	
Make beds	X	X	X				X	
Floor care	X	X	X		X	X	X	
Tidy up kitchen			X			X	X	
Meal Preparation	X					X	X	
Feeding				X	X	X	X	
Vacuum	X		X		X	X		
Empty Trash		X		X	X	X		
Dust				X		X	X	
Clean Bathroom	X	X		X		X	X	
Healthcare Appt.		X		X			X	
Shopping	X	X	X	X	X			
Clutter Control	X		X			X		
Read/play games					X	X	X	
Change incontinent wear	X		X	X		X	X	
Shampoo				X			X	
Hair grooming	X	X		X	X	X		
Oral hygiene		X	X	X				
Give fluids	X	X	X	X	X		X	
DAILY HOURS	15	15	15	15	15	15	15	

TOTAL WEEKLY HOURS: 15

Employee Signature & Name: 

Date: September 8,
2025

Client Signature: 

Date: September 8,
2025