

# Vintex Quality Care, Inc.

## Aide Escort

### Weekly Time Sheet

EMPLOYEE NAME: \_\_\_\_\_

CLIENTS NAME: \_\_\_\_\_

DAY	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Date of Service							
Start Time							
Finish Time							
<b>TYPE OF SERVICE PROVIDED (Please Initial the Appropriate Box)</b>							
Doctors Appt.							
Grocery Shopping							
Outing							
Pick Up/Delivery							
Move Client Belongings							
Cleaning							
Other							

**Briefly explain any discrepancies. Example: If patient missed appointment; was not at location; refused services or other situation.**

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Aide Signature

\_\_\_\_\_  
Date