

BAY SHORE SERVICES, INC.  
 1409 Wesley Drive  
 Salisbury, MD 21801  
 (410)-341-0307      (410)-341-0308 fax

**TIME VERIFICATION**

For all hours coded as other, employees must attach signed time verifications to their time sheet. Separate forms are required for each person who receives services in their own homes (coded as other on the time sheet). The signature of the individual or representative is required to verify the hours are accurate and the services are satisfactory. Individuals or their representatives complete this form by recording or reviewing the assigned employee's work hours, drawing a line through any unworked days, initialing any corrections, and signing the form. **Please do not sign blank forms.** If the verified hours differ from the hours on the time sheet, the employee is paid the verified hours. Please call our administrative office if you have any questions or concerns.

Services provided to: \_\_\_\_\_

Employee: \_\_\_\_\_

Time Period: From: \_\_\_\_\_ To: \_\_\_\_\_

DAY	DATE	A.M. HOURS		P.M. HOURS		TOTAL HOURS	COMMENTS
		FROM	TO	FROM	TO		
Mon.							
Tues.							
Wed.							
Thur.							
Fri.							
Sat.							
Sun.							
Mon.							
Tues.							
Wed.							
Thur.							
Fri.							
Sat.							
Sun.							
		<b>TOTAL HOURS</b>					

**I verify the above hours are correct and service was satisfactory.**

WPR: \_\_\_\_\_

Sleep: \_\_\_\_\_

Wage 1: \_\_\_\_\_

DCA: \$ \_\_\_\_\_

O.T. \_\_\_\_\_

Leave: \_\_\_\_\_

\_\_\_\_\_  
 Signature of person receiving services or representative

\_\_\_\_\_  
 Date