

**Consumer Directed Care Services (CDC)
Paid Time Off**

Payroll Period From: / / To: / /

Consumer #: Telephone #:

Consumer Name (Print):

Worker Name (Print):

Worker Telephone #:

Worker Last 4 Digits of SSN

41707



USE FOR PAID TIME OFF ONLY* *UTILIZAR SOLAMENTE PARA TIEMPO LIBRE PAGADO

Please record the hours your Worker was scheduled to work but instead is requesting Paid Time Off.

Por favor escribe las horas que su Worker estaba designado a trabajar, pero en lugar esta solicitando Tiempo Libre Pagado.

WEEK #1	Scheduled Time In				Scheduled Time Out				Total Scheduled Hours			
	HRS	MIN	AM	PM	HRS	MIN	AM	PM	HRS	MIN	AM	PM
Sun.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Mon.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Tue.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Wed.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Thu.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Fri.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Sat.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Total Week 1	Please note that Tempus pays the Worker based on daily, not weekly, totals. <input type="text"/> : <input type="text"/>											

WEEK #2	Scheduled Time In				Scheduled Time Out				Total Scheduled Hours			
	HRS	MIN	AM	PM	HRS	MIN	AM	PM	HRS	MIN	AM	PM
Sun.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Mon.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Tue.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Wed.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Thu.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Fri.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Sat.	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>
Total Week 2	Please note that Tempus pays the Worker based on daily, not weekly, totals. <input type="text"/> : <input type="text"/>											

By signing below, I certify under pain and penalty of perjury that **I was scheduled** to receive Consumer Directed Care services from the CDC Worker during the **Paid Time Off** taken as indicated on this activity form; and I am not enrolled in any other duplicative services.

Consumer/Surrogate
Signature

By signing below, I certify under pain and penalty of perjury that **I was scheduled** to provide Consumer Directed Care services to the consumer during the **Paid Time Off** taken, as indicated on this activity form. I understand I must have accrued Paid Time Off in order to receive pay.

Worker
Signature