



CADDO Worker Timesheet

Worker Name: _____

Veteran Name: _____

Authorized Representative Name: _____

Pay period Begins: (MM/DD/YYYY) / / / / / Pay period Ends: (MM/DD/YYYY) / / / / /

Day of Week	Service Date (MM/DD)	Time In	Time Out
Sun	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Mon	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Tues	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Wed	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Thurs	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Fri	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Sat	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Sun	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Mon	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Tues	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Wed	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Thurs	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Fri	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
Sat	/	: <input type="radio"/> AM : <input type="radio"/> PM	: <input type="radio"/> AM : <input type="radio"/> PM
			Total Hours:

The Employer and Worker certify that the information provided on this timesheet is a true and accurate statement of the services provided. The Employer and Worker understand that payment for services provided are subject to payroll taxes.

Worker Signature: _____ Date: ___ / ___ / _____

Veteran/AR Signature: _____ Date: ___ / ___ / _____

Timesheet Submission

Fax:
855-325-4668

Email:
PayrollTimesheets@premier-fms.com

Mail:
10425 W North Ave
Suite 345 Milwaukee, WI
53226

TIMESHEET CHECK-LIST

- Did I fill-in "am" or "pm" next to each time in and time out entry?
- Is my legal name on the TS?
- Is my Employer's legal name on the TS?
- Did I fill-in the correct pay period with the correct start and end dates?

Example (See schedule for dates):

Pay period Begins: (MM/DD/YYYY)

07 / 07 / 2019

Pay period Ends: (MM/DD/YYYY)

07 / 20 / 2019

- Did I fill-in the dates for the correct day of the week?
Example: July 9th is a Sunday - you would fill the first Sunday as 07/09
- Did I review that all my hours are accurate?
- Did I use the correct 15 minute increments to record my work time?
15 min. | 30 min. | 45 min. | 00 min.
- Did I sign and date my TS?
Example: If the last day you worked was July 23rd - you would sign and date the TS as 7/23/yr.
- Did my participant sign and date my TS?
- Did I make sure hours submitted are worked on or before the TS due date and signed date?
- Did I make sure the dates on the TS are for one pay period **ONLY** and do not cross with any other pay periods?
- Did I make sure I did **NOT** use white-out to make corrections?

Once all check boxes are checked, please submit your timesheet to Premier Financial Management Services.

PLEASE NOTE: Timesheets received that are missing any of the above information will be rejected and returned for correction. This may result in delay of payment.

MARKING INSTRUCTIONS

Day of Week	Service Date (MM/DD)	Indicate Date of Service		Select AM or PM		Service Code
		Time In	Time Out	Time In	Time Out	
Sun	07 / 07	10:00 ● AM ○ PM	01:00 ○ AM ● PM	10:00 ● AM ○ PM	01:00 ○ AM ● PM	S H C
Mon	07 / 08	12:15 ○ AM ● PM	06:15 ○ AM ● PM	12:15 ○ AM ● PM	06:15 ○ AM ● PM	C C
Tue	07 / 09	12:00 ● AM ○ PM	06:00 ○ AM ● PM	12:00 ● AM ○ PM	06:00 ○ AM ● PM	S H C

Indicate Service Code

MARKING INSTRUCTIONS FOR TIMESHEET

- Write in **BLACK** or **BLUE** ink only.
- Write as large and legible as possible without touching the sides of the boxes.
Do not write outside of the boxes.

TIMESHEET SUBMISSION

Mail:

10425 W. North Avenue, Suite 345
Milwaukee, WI 53226

Email:

Caddo@premier-fms.com

Fax:

1-888-634-8295

WHY E-TIMESHEETS?

- Eliminates the risk of filling your timesheet incorrectly.
- Timesheets will be processed faster!
- It's paperless! Go GREEN!
- Can be submitted on any device with an internet connection (home, work, or smartphone.)
- It is secure, confidential and can be accessed from any location at any time of the day, year round.