

Worker Name: _____

Veteran Name: _____

Employer of Record Name: _____

Pay Period Begins: (MM/DD/YYYY) _____ Pay Period Ends: (MM/DD/YYYY) _____

Service Date (MM/DD)	Time In		Time Out		Time In		Time Out		Total Hours
/	:	AM PM	:	AM PM	:	AM PM	:	AM PM	
/	:	AM PM	:	AM PM	:	AM PM	:	AM PM	
/	:	AM PM	:	AM PM	:	AM PM	:	AM PM	
/	:	AM PM	:	AM PM	:	AM PM	:	AM PM	
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/	:	AM PM	:	AM PM	:	AM PM	:	AM PM	
/	:	AM PM	:	AM PM	:	AM PM	:	AM PM	
/	:	AM PM	:	AM PM	:	AM PM	:	AM PM	
Service Hours Total									

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: _____

Vet/AR Signature: _____ Date: _____

Timesheet Submission:	Mail	Email	Fax
	10425 W North Ave	PayrollTimesheets@premier-fms.com	855.325.4668
	Suite 345		
	Milwaukee, WI 53226		

SWODA AGING SERVICES VETERAN DIRECTED CARE TIMESHEET INSTRUCTIONS

TIMESHEET CHECKLIST

Is my legal name on the Timesheet?

Is my employer's legal name on the Timesheet?

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)	10/01/2025	Pay Period Ends: (MM/DD/YYYY)	10/15/2025
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Did I fill in the dates for each day worked?

Did I use the correct 15-minute increments to record my work time?

15 min. | 30 min. | 45 min. | 60 min.

Did I sign and date my Timesheet?

Example: If the last day you worked was July 23rd, you would sign and date the Timesheet as 7/23/20xx.

Did my Veteran/employer sign and date my Timesheet?

Did I make sure hours submitted are worked on or before the Timesheet due date and signed date?

Did I make sure the dates on the Timesheet 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?

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

MARKING INSTRUCTIONS

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.

X NO	X NO	✓ YES
5 15	5 : 15	5 : 15

TIMESHEET SUBMISSION

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

Email: PayrollTimesheets@Premier-FMS.com

Fax: 855.325.4668

HOW DO I RECORD MY HOURS

If you only work one shift a day, your hours should be recorded in the first Time In and Time Out columns.

Service Date (MM/DD)	Time In	Time Out
09 / 22	8 : 00 <input type="checkbox"/> AM <input type="checkbox"/> PM	1 : 30 <input type="checkbox"/> AM <input type="checkbox"/> PM

If you work more than one shift per day, your hours for the additional shift should be recorded in the second Time In and Time Out columns.

Service Date (MM/DD)	Time In	Time Out	Time In	Time Out
09 / 22	8 : 00 <input type="checkbox"/> AM <input type="checkbox"/> PM	1 : 30 <input type="checkbox"/> AM <input type="checkbox"/> PM	3 : 00 <input type="checkbox"/> AM <input type="checkbox"/> PM	7 : 00 <input type="checkbox"/> AM <input type="checkbox"/> PM

What should I do if I work past midnight on any given day?

- The hours worked past midnight **MUST** be recorded on the next day.

Example: If you work Monday from 6:00pm to Tuesday 6:00am, your timesheet should look as follows

Service Date (MM/DD)	Time In	Time Out
09 / 22	6 : 00 <input type="checkbox"/> AM <input type="checkbox"/> PM	12 : 00 <input type="checkbox"/> AM <input type="checkbox"/> PM
09 / 23	12 : 00 <input type="checkbox"/> AM <input type="checkbox"/> PM	6 : 00 <input type="checkbox"/> AM <input type="checkbox"/> PM