**<<<PLACEHOLDER FOR PLAN LOGO>>>**

**PDO Timesheet Attestation Language**

**This timesheet shows the correct service and the correct number of hours that I have provided care to the participant during this time period.**

**Signature of direct service worker \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_**

**This timesheet shows the correct service and the correct number of hours that my direct service worker has provided care to me during this time period.**

**Signature of participant/representative \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_**