

TIMESHEET SUBMISSION
Mail: 10425 W. North Ave., Suite 345
 Milwaukee, WI 53226
Email: Timesheets@Resilient-SD.com
Fax: 1.855.325.4668

Questions? Contact your ResilientSD Account Coordinator

Phone: 855.613.2898

Email: COCFI@Resilient-SD.com

Direct Care Worker Name: _____

Veteran Name: _____

Authorized Representative Name: _____ AR Phone: _____

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	
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Service Hours Total					

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

Direct Care Worker Signature: _____ Date: _____

Veteran/Authorized Representative Signature: _____ Date: _____

CENTER FOR INDEPENDENCE – VETERAN CHOICE PROGRAM

TIMESHEET INSTRUCTIONS

TIMESHEET CHECKLIST

- Is my legal name on the Timesheet?
 - Is my Veteran’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.



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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 checked="" type="checkbox"/> PM	12 : 00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
09 / 23	12 : 00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	6 : 00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM