



DOVES HOME CARE, LLC

7 Professional Parkway Suite 104
Hattiesburg MS, 39402
(601) 366 – 6220 Fax (601) 336 – 7294

Client's Name: _____ January Activity Sheet Aide's Name: _____
PCA: _____ RESPITE: _____ Total Hours: _____

DATE OF SERVICES	CLIENT SIGNATURE	SHIFT NOTES	AIDE SIGNATURE
1/01/19		A B C D E F G H	
1/02/19		A B C D E F G H	
1/03/19		A B C D E F G H	
1/04/19		A B C D E F G H	
1/05/19		A B C D E F G H	
1/06/19		A B C D E F G H	
1/07/19		A B C D E F G H	
1/08/19		A B C D E F G H	
1/09/19		A B C D E F G H	
1/10/19		A B C D E F G H	
1/11/19		A B C D E F G H	
1/12/19		A B C D E F G H	
1/13/19		A B C D E F G H	
1/14/19		A B C D E F G H	
1/15/19		A B C D E F G H	
1/16/19		A B C D E F G H	
1/17/19		A B C D E F G H	
1/18/19		A B C D E F G H	
1/19/19		A B C D E F G H	
1/20/19		A B C D E F G H	
1/21/19		A B C D E F G H	
1/22/19		A B C D E F G H	
1/23/19		A B C D E F G H	
1/24/19		A B C D E F G H	
1/25/19		A B C D E F G H	
1/26/19		A B C D E F G H	
1/27/19		A B C D E F G H	
1/28/19		A B C D E F G H	
1/29/19		A B C D E F G H	
1/30/19		A B C D E F G H	
1/31/19		A B C D E F G H	

*Please make sure your client's sign this form on the day of service and if they are not home. Please note a comment to show the reason for no service if you are not making the day in the week.

- A. Personal Care / Bathing / Feeding
- B. Bedroom / Bathroom
- C. kitchen / Empty Trash

- D. Living Room / Dusting
- E. Meal Preparation
- F. Sweeting / Mopping / Vacuum

- G. Laundry
- H. Missed Visit

Notes / Comments: _____

Supervisor Signature: _____ Date: _____



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Client's Name: _____ February Activity Sheet Aide's Name: _____
PCA: _____ RESPITE: _____ Total Hours: _____

DATE OF SERVICES	CLIENT SIGNATURE	SHIFT NOTES	AIDE SIGNATURE
2/01/19		A B C D E F G H	
2/02/19		A B C D E F G H	
2/03/19		A B C D E F G H	
2/04/19		A B C D E F G H	
2/05/19		A B C D E F G H	
2/06/19		A B C D E F G H	
2/07/19		A B C D E F G H	
2/08/19		A B C D E F G H	
2/09/19		A B C D E F G H	
2/10/19		A B C D E F G H	
2/11/19		A B C D E F G H	
2/12/19		A B C D E F G H	
2/13/19		A B C D E F G H	
2/14/19		A B C D E F G H	
2/15/19		A B C D E F G H	
2/16/19		A B C D E F G H	
2/17/19		A B C D E F G H	
2/18/19		A B C D E F G H	
2/19/19		A B C D E F G H	
2/20/19		A B C D E F G H	
2/21/19		A B C D E F G H	
2/22/19		A B C D E F G H	
2/23/19		A B C D E F G H	
2/24/19		A B C D E F G H	
2/25/19		A B C D E F G H	
2/26/19		A B C D E F G H	
2/27/19		A B C D E F G H	
2/28/19		A B C D E F G H	

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- A. Personal Care / Bathing / Feeding
- B. Bedroom / Bathroom
- C. kitchen / Empty Trash

- D. Living Room / Dusting
- E. Meal Preparation
- F. Sweeting / Mopping / Vacuum

- G. Laundry
- H. Missed Visit

Notes / Comments: _____

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Client's Name: _____ **March Activity Sheet** Aide's Name: _____
PCA: _____ RESPITE: _____ **Total Hours:** _____

DATE OF SERVICES	CLIENT SIGNATURE	SHIFT NOTES	AIDE SIGNATURE
3/01/19		A B C D E F G H	
3/02/19		A B C D E F G H	
3/03/19		A B C D E F G H	
3/04/19		A B C D E F G H	
3/05/19		A B C D E F G H	
3/06/19		A B C D E F G H	
3/07/19		A B C D E F G H	
3/08/19		A B C D E F G H	
3/09/19		A B C D E F G H	
3/10/19		A B C D E F G H	
3/11/19		A B C D E F G H	
3/12/19		A B C D E F G H	
3/13/19		A B C D E F G H	
3/14/19		A B C D E F G H	
3/15/19		A B C D E F G H	
3/16/19		A B C D E F G H	
3/17/19		A B C D E F G H	
3/18/19		A B C D E F G H	
3/19/19		A B C D E F G H	
3/20/19		A B C D E F G H	
3/21/19		A B C D E F G H	
3/22/19		A B C D E F G H	
3/23/19		A B C D E F G H	
3/24/19		A B C D E F G H	
3/25/19		A B C D E F G H	
3/26/19		A B C D E F G H	
3/27/19		A B C D E F G H	
3/28/19		A B C D E F G H	
3/29/19		A B C D E F G H	
3/30/19		A B C D E F G H	
3/31/19		A B C D E F G H	

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- A. Personal Care / Bathing / Feeding
- B. Bedroom / Bathroom
- C. kitchen / Empty Trash

- D. Living Room / Dusting
- E. Meal Preparation
- F. Sweeting / Mopping / Vacuum

- G. Laundry
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Client's Name: _____ April Activity Sheet Aide's Name: _____
PCA: _____ RESPITE: _____ Total Hours: _____

DATE OF SERVICES	CLIENT SIGNATURE	SHIFT NOTES	AIDE SIGNATURE
04/01/19		A B C D E F G H	
04/02/19		A B C D E F G H	
04/03/19		A B C D E F G H	
04/04/19		A B C D E F G H	
04/05/19		A B C D E F G H	
04/06/19		A B C D E F G H	
04/07/19		A B C D E F G H	
04/08/19		A B C D E F G H	
04/09/19		A B C D E F G H	
04/10/19		A B C D E F G H	
04/11/19		A B C D E F G H	
04/12/19		A B C D E F G H	
04/13/19		A B C D E F G H	
04/14/19		A B C D E F G H	
04/15/19		A B C D E F G H	
04/16/19		A B C D E F G H	
04/17/19		A B C D E F G H	
04/18/19		A B C D E F G H	
04/19/19		A B C D E F G H	
04/20/19		A B C D E F G H	
04/21/19		A B C D E F G H	
04/22/19		A B C D E F G H	
04/23/19		A B C D E F G H	
04/24/19		A B C D E F G H	
04/25/19		A B C D E F G H	
04/26/19		A B C D E F G H	
04/27/19		A B C D E F G H	
04/28/19		A B C D E F G H	
04/29/19		A B C D E F G H	
04/30/19		A B C D E F G H	

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- A. Personal Care / Bathing / Feeding
- B. Bedroom / Bathroom
- C. kitchen / Empty Trash

- D. Living Room / Dusting
- E. Meal Preparation
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Client's Name: _____ **May Activity Sheet** Aide's Name: _____
PCA: _____ RESPITE: _____ **Total Hours:** _____

DATE OF SERVICES	CLIENT SIGNATURE	SHIFT NOTES	AIDE SIGNATURE
05/01/19		A B C D E F G H	
05/02/19		A B C D E F G H	
05/03/19		A B C D E F G H	
05/04/19		A B C D E F G H	
05/05/19		A B C D E F G H	
05/06/19		A B C D E F G H	
05/07/19		A B C D E F G H	
05/08/19		A B C D E F G H	
05/09/19		A B C D E F G H	
05/10/19		A B C D E F G H	
05/11/19		A B C D E F G H	
05/12/19		A B C D E F G H	
05/13/19		A B C D E F G H	
05/14/19		A B C D E F G H	
05/15/19		A B C D E F G H	
05/16/19		A B C D E F G H	
05/17/19		A B C D E F G H	
05/18/19		A B C D E F G H	
05/19/19		A B C D E F G H	
05/20/19		A B C D E F G H	
05/21/19		A B C D E F G H	
05/22/19		A B C D E F G H	
05/23/19		A B C D E F G H	
05/24/19		A B C D E F G H	
05/25/19		A B C D E F G H	
05/26/19		A B C D E F G H	
05/27/19		A B C D E F G H	
05/28/19		A B C D E F G H	
05/29/19		A B C D E F G H	
05/30/19		A B C D E F G H	
05/31/19		A B C D E F G H	

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Client's Name: _____ **June Activity Sheet** Aide's Name: _____
PCA: ____ RESPITE: ____ Total Hours: _____

DATE OF SERVICES	CLIENT SIGNATURE	SHIFT NOTES	AIDE SIGNATURE
06/01/19		A B C D E F G H	
06/02/19		A B C D E F G H	
06/03/19		A B C D E F G H	
06/04/19		A B C D E F G H	
06/05/19		A B C D E F G H	
06/06/19		A B C D E F G H	
06/07/19		A B C D E F G H	
06/08/19		A B C D E F G H	
06/09/19		A B C D E F G H	
06/10/19		A B C D E F G H	
06/11/19		A B C D E F G H	
06/12/19		A B C D E F G H	
06/13/19		A B C D E F G H	
06/14/19		A B C D E F G H	
06/15/19		A B C D E F G H	
06/16/19		A B C D E F G H	
06/17/19		A B C D E F G H	
06/18/19		A B C D E F G H	
06/19/19		A B C D E F G H	
06/20/19		A B C D E F G H	
06/21/19		A B C D E F G H	
06/22/19		A B C D E F G H	
06/23/19		A B C D E F G H	
06/24/19		A B C D E F G H	
06/25/19		A B C D E F G H	
06/26/19		A B C D E F G H	
06/27/19		A B C D E F G H	
06/28/19		A B C D E F G H	
06/29/19		A B C D E F G H	
06/30/19		A B C D E F G H	

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Notes / Comments: _____

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Client's Name: _____ July Activity Sheet Aide's Name: _____
PCA: _____ RESPITE: _____ Total Hours: _____

DATE OF SERVICES	CLIENT SIGNATURE	SHIFT NOTES	AIDE SIGNATURE
07/01/19		A B C D E F G H	
07/02/19		A B C D E F G H	
07/03/19		A B C D E F G H	
07/04/19		A B C D E F G H	
07/05/19		A B C D E F G H	
07/06/19		A B C D E F G H	
07/07/19		A B C D E F G H	
07/08/19		A B C D E F G H	
07/09/19		A B C D E F G H	
07/10/19		A B C D E F G H	
07/11/19		A B C D E F G H	
07/12/19		A B C D E F G H	
07/13/19		A B C D E F G H	
07/14/19		A B C D E F G H	
07/15/19		A B C D E F G H	
07/16/19		A B C D E F G H	
07/17/19		A B C D E F G H	
07/18/19		A B C D E F G H	
07/19/19		A B C D E F G H	
07/20/19		A B C D E F G H	
07/21/19		A B C D E F G H	
07/22/19		A B C D E F G H	
07/23/19		A B C D E F G H	
07/24/19		A B C D E F G H	
07/25/19		A B C D E F G H	
07/26/19		A B C D E F G H	
07/27/19		A B C D E F G H	
07/28/19		A B C D E F G H	
07/29/19		A B C D E F G H	
07/30/19		A B C D E F G H	
07/31/19		A B C D E F G H	

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