

Residential Options, Inc.

3815 W. St. Joseph
Suite A103
Lansing, Michigan 48917

Timecards are due by 12 PM the following Friday.

Office: 517-374-8066
Fax: 517-374-5912

Employee Name: _____

Pay Period Ending: _____

Worksite: _____

Please Use Pencils Only (unless faxing)!

Please Indicate AM or PM

	DATE	Respite IN	Respite OUT	Reg IN	Reg OUT	Reg. IN	Reg. OUT	Respite IN	Respite OUT	Total Reg.	Total Respite
F											
S											
S											
M											
T											
W											
TH											
TOTALS											
	DATE	Respite IN	Respite OUT	Reg IN	Reg OUT	Reg. IN	Reg. OUT	Respite IN	Respite OUT	Total Reg.	Total Respite
F											
S											
S											
M											
T											
W											
TH											
TOTALS											
OFFICE USE ONLY				OFFICE USE ONLY				OFFICE USE ONLY			
				REG.	REG. OT	RESPITE	RESPITE OT	LOA	SICK	OTHER	
TOTAL WEEK 1:											
TOTAL WEEK 2:											
GRAND TOTAL:											

EMPLOYEE SIGNATURE: _____

PARENT/GUARDIAN SIGNATURE: _____