HILC IN-HOME

TIME AND MILEAGE ACCOUNTABILITY Aide Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| DATE | CLIENT NAME & ADDRESSDEPARTING FROM | DEPARTURE TIME | CLIENT NAME & ADDRESSARRIVING TO | ARRIVALTIME | MILES – FOR ERRANDS ONLY | TOTALTIME BETWEEN CLIENTS | REASON FOR TRAVEL |
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| DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | TOTAL CLIENT POC RELATED MILES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TOTAL MILEAGE PAID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  | TOTAL BETWEENCLIENT TRAVEL TIME:\_\_\_\_\_\_\_\_\_\_\_\_\_TOTAL GROSS PAID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |