

| Date of Service | Time In | Time Out | Specific Services Performed (Dusting, Vacuuming, Cooking, Laundry, etc.) | Amount Paid | ✓ Payment Type | | |
|-----------------|---------|----------|---|-------------|----------------|-------------|-------|
| | | | | | Cash | Money Order | Check |
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I swear the above facts to be accurate and true to the best of my knowledge.

Signature: _____ Date: _____

For Notary Use Only

Subscribed and sworn to me this _____ Day of _____ , _____

State of _____ , country of _____

X _____

Notary Public Signature (Affix Seal)

My Commission Expires: _____ Year _____