

**Payroll Period**

From Sunday

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Through Saturday

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**STAVROS FISCAL INTERMEDIARY SERVICES**

P.O BOX 2130, Amherst, MA 01004-2130

Tel: (413) 256-6692, (800) 442-1185

Fax: (888) 773-4281, (413) 256-3849

19438



**Employer Information**

Number:

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Name

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**PCA Information**

SSN:

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Last 4 Digits Only

Name

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**USE FOR PCA SICK LEAVE ONLY\*\*\*USO PARA PCA TIEMPO DE ENFERMEDAD SOLAMENTE**

Please record the hours your PCA was scheduled to work but has requested sick leave. Favor de escribir las horas que el PCA estaba designado a trabajar, pero en lugar está solicitando tiempo de enfermedad.

Week #1	Scheduled Time In				Scheduled Time Out				Tot. Day/Eve Hours 6 AM to Midnight		Tot. Night Hours	Week #2	Scheduled Time In				Scheduled Time Out				Tot. Day/Eve Hours 6 AM to Midnight		Tot. Night Hours
	Hour	MIN.	AM	PM	Hour	MIN.	AM	PM	Hours	MIN.	Hours		Hour	MIN.	AM	PM	Hour	MIN.	AM	PM	Hours	MIN.	Hours
Sun.			AM	PM			AM	PM				Sun.			AM	PM			AM	PM			
Mon.			AM	PM			AM	PM				Mon.			AM	PM			AM	PM			
Tue.			AM	PM			AM	PM				Tue.			AM	PM			AM	PM			
Wed.			AM	PM			AM	PM				Wed.			AM	PM			AM	PM			
Thu.			AM	PM			AM	PM				Thu.			AM	PM			AM	PM			
Fri.			AM	PM			AM	PM				Fri.			AM	PM			AM	PM			
Sat.			AM	PM			AM	PM				Sat.			AM	PM			AM	PM			
<b>Total Week 1</b>											<b>Total Week 2</b>												

By signing below, I certify under pains and penalty of perjury that I was scheduled to receive MassHealth PCA services from the PCA during the sick leave time(s) taken, as indicated on this activity form; and I am not enrolled in Adult Foster Care or Group Adult Foster Care.

By signing below, I certify under pain and penalty of perjury that I was scheduled to provide MassHealth PCA services to the consumer during the sick leave time(s) taken, as indicated on this activity form. I understand I must have accrued sick leave time in order to receive paid sick leave. I understand I may be required to provide certification when an earned sick time period covers more than 24 consecutively scheduled hours.

Employer/Surrogate's signature

Date

PCA's Signature

Date