Daily Care Record

Caregiver Name:

Caretaker Signature:

Date:	Time-In:	Time-Out:	Total Miles:	Comments:
Fask Completed?		(y for yes or n for no) &		
Eating/Feeding				
Toileting				
Bathing				
Grooming				
Dressing				
Transferring				
Mobility/Exercise				
Med. Reminder				
Meal Prep				
Laundry				
Light Housework				
Companionship				
Transportation				
			Mileage Tracker	
Destination: (i.e., Meijer)		Miles:	Total:	
ate:				
lient Signature:				