

Daily Service Note

SONDER HOMECARE · 245D LICENSE 1234567

CLIENT	PMI #	DATE OF BIRTH	DATE OF SERVICE	SETTING
Taylor Frey	45678901	09/30/2003	08/10/2026	Home · POS 12
SERVICE	HOURS	UNITS	TIME	CAREGIVER
ILS, individual, H2032 TG	2	8	5:30 PM – 7:30 PM	Tobi Okafor, DSP

SERVICE NARRATIVE

Budgeting session. Taylor entered this week’s spending into the tracker and noticed the food budget was over; chose to cook twice more this week. Practiced calling the landlord about a leaky faucet.

SUPPORTS PROVIDED

Personal care / ADLs

Skill building per support plan

Community integration

Money management

SUPPORT PLAN OUTCOMES · 2 OF 2 ADDRESSED

- YES

Did Taylor cook or plan a meal today?
Live in my own apartment
- YES

Did Taylor complete a chore from the checklist without a prompt?
Live in my own apartment

LEVEL OF ASSISTANCE

High
Hands-on support or continuous direction

DAILY ACTIVITIES

- Assisted Taylor with coordinating transportation to events, appointments, and social outings
- Supported Taylor with medication reminders and monitoring for side effects

MEDICATION ADMINISTRATION

None scheduled

INCIDENTS

None reported

ACKNOWLEDGEMENT AND REQUIRED SIGNATURES

Electronically signed by:

Tobi Okafor

08/10/2026, 7:32 PM CT · UMPI A100000004

CAREGIVER SIGNATURE

Caregiver. I certify under penalty of law that I personally provided the services described here, and that the date, times, hours, and units on this note are true and complete. I understand that falsifying a service record is fraud and may lead to criminal prosecution, civil penalties, and loss of my employment.

Electronically signed by:

Taylor Frey

08/10/2026, 7:31 PM CT · verified with private client code

CLIENT SIGNATURE

Person served. I have reviewed this note. I certify that I received this service on the date and during the times shown, from the caregiver named here, as authorized in my support plan. If anything above is wrong I will not sign, and I will tell the provider so it can be corrected. I understand that knowingly giving false information for Medical Assistance payment is a crime.

VISIT VERIFICATION

Electronic visit verification, GPS captured at clock-in and clock-out