CAREGIVER AGREEMENT

I. The Parties. This Caregiver Agreement ("Agree	•
20 is by and between ["Caregiver"].	["Recipient"] and
II. Term of Agreement. This Agreement shall con	nmence on, by either party upon reasonable notice to the
III. Purpose. The purpose of this Agreement is to Caregiver will assist Recipient with instrumental a continue to live at home and prevent Recipient fro facility.	ctivities of daily living in order for Recipient to
IV. Employment Status: The Caregiver shall be i	recognized as a: (check one)
Security & Medicare taxes from the Caregiver's instructions on Form W-4 and Recipient will pay Social Security & Medical unemployment insurance taxes. Recipient January 31st after the calendar year conclined.	ings. Caregiver will complete Form I-9 ovide the required documentation verifying. Recipient will withhold the required Social ver's pay, along with income taxes per the state withholding form (if applicable). are taxes as well as federal and state will provide Caregiver with Form W-2 by udes. Recipient will report Caregiver's cion so that employee receives the appropriate
defined under Federal and State law. Ther for the payment of Social Security and Med	Caregiver as an Independent Contractor as efore, Caregiver shall bear all responsibility dicare taxes as well as any other withholdings al law. If the Caregiver decides at any time to
V. Compensation. Recipient shall pay Caregiver □ - Annually.	\$ □ - Hourly □ - Daily □ - Weekly
□ - Caretaker's Commitment. The Caret	aker shall provide their services: (check one)
□ - For at least hours per we	ek.
□ - On an "as-needed" basis.	
☐ - Room and Board. Recipient shall: (ch	eck one)
\Box - Provide room and board and parts	ay for all related expenses

□ - Pay Caregiver \$ per month for room and board, which consists of proportional share of their mortgage/rent, taxes, insurance, heat, electricity, water, sewer, and groceries.		
☐ - Reimbursement. Recipient shall reimburse Caregiver for all out of pocket expenses borne by Caregiver in connection with the services performed for the Recipient's benefit		
☐ - Vehicle. Expenses shall include mileage at the rate of \$ per mile.		
VI. Schedule. The Caregiver: (check one)		
\square - Shall not be bound to a schedule.		
□ - Shall be bound to the following *schedule:		
Monday:: ☐ A.M. ☐ P.M to: ☐ A.M. ☐ P.M		
Tuesday:: □ A.M. □ P.M to: □ A.M. □ P.M		
Wednesday:: ☐ A.M. ☐ P.M to: ☐ A.M. ☐ P.M		
Thursday::		
Friday:: □ A.M. □ P.M to: □ A.M. □ P.M		
Saturday:: □ A.M. □ P.M to: □ A.M. □ P.M		
Sunday:: ☐ A.M. ☐ P.M to: ☐ A.M. ☐ P.M		
*Schedule may change from time-to-time depending on the schedule and routine of the Recipient.		
VII. Services to be Performed. Caregiver agrees to provide care to Recipient at with a mailing address of, City of, State of		
Services to be provided by Caregiver will include, but shall not necessarily be limited to:		
☐ - Transportation and errands:		
$\hfill\Box$ - Driving Recipient to medical, dental, adult day care and other appointments and activities;		
$\hfill \Box$ - Shopping for groceries and other items needed by Recipient, and filling/refilling prescriptions;		
☐ - Running other errands for Recipient including but not limited to:		
□ - Meals:		
□ - Preparing meals per day as well as daily spacks for Recipient		

	□ - Purchasing or assisting to get groceries on behalf of the Recipient.	
	☐ - Acting as a companion at restaurants with the Recipient.	
	□ - Housework:	
	□ - Cleaning Recipient's living area;	
	□ - Laundry and changing linens.	
	☐ - Financial: (if selected, may require a durable power of attorney)	
	\Box - Paying Recipient's bills, balancing Recipient's check book, making deposits, dealing with health insurance, and other paperwork.	
	□ - Payment of:	
	☐ - Administration of Medication:	
	□ - Ensuring the Recipient is taking all medications as prescribed;	
	☐ - Assisting the Recipient with living and exercising routines;	
	☐ - Assistance with Everyday Life:	
	\Box - Transferring the Recipient from bed, chair, and toilet; ambulation, bathing, hygiene/grooming; toileting; eating.	
	\Box - Scheduling tasks, managing the Recipient's calendar, making appointments with health care services and managing everyday tasks (e.g. haircuts, dental, etc.)	
	\Box - Monitoring the Recipient for safety, including responding to alarm system to control wandering/fall risk.	
	$\hfill\Box$ - Monitoring the Recipient's health and bringing health problems to attention of health care providers.	
Hereinaf	ter known as the "Services".	
VIII. Veh	icle. The Caregiver: (choose one)	
	☐ - Shall be provided with a vehicle to perform the Services for the Caregiver.	
ir d	☐ - Shall not be provided with a vehicle. Caregiver shall be reimbursed by the Recipient in accordance with the Internal Revenue Services (IRS) reimbursement rate per mile driven. Therefore, the Caregiver shall be required to maintain a mileage log and submit to the Recipient at the end of the payment period.	

IX. Social Media. Caregiver understand that no information about his/her location, plans for the day, pictures of the Recipient or family members, associates, or friends shall be shared on any social media network. Caregiver will be required to not inform strangers or third (3rd) parties where he or she shall be spending their time during the day unless the Recipient grants

consent. Recipient may only grant such consent if he or she is able to make conscious decisions on their behalf.

- **X. Amendments**. This Agreement may be modified or amended under the condition that any such amendment is attached and authorized by the Parties.
- **XI. Severability**. This Agreement shall remain in effect under the circumstance a section or provision is unenforceable or invalid. All remaining sections and provisions shall be deemed legally binding unless a court rules that any such provision or section is invalid or unenforceable, thus, limiting the effect of another provision or section. In such case, the affected provision or section shall be enforced as so limited.

XII. Governing Law. This Agreement shall be governed under the laws in the State of			
XIII. Entire Agreement. This Agreement, along with any attachments or addendums, represents the entire agreement between the parties. Therefore, this Agreement supersedes any prior agreements, promises, conditions, or understandings between the Caregiver and Recipient.			
Caregiver's Signature	Date		
Recipient's Signature	Date		

EXHIBIT A

This Exhibit shall only be applicable if the Caregiver is considered a W-4 Employee under Section IV of this Agreement.

. Benefits. The Caregiver shall be entitled to the following	lowing: (check applicable boxes)
☐ - Health Insurance . Recipient shall provid	e: (check one)
☐ - Complete Health Insurance Cove	rage
☐ - \$ per month attributable	e to Health Insurance.
☐ - Retirement Benefits. Recipient shall pro	ovide: (check applicable)
☐ - 401(k) Eligibility	
□ - IRA	
☐ - Health Savings Account	
☐ - Paid Time-Off. Caregiver shall receive the	ne following paid time-off: (check applicable)
\Box - Sick Leave days per year. Advance notice is requested for any appointments which may cause the Recipient undue hardship.	
☐ - Vacation Time days per yetime at least 30 days in advance.	ear. Caregiver must request to use vacation
□ - Holidays – The Recipient requires federal holidays EXCEPT:	s the Caregiver work on the following
I. Probationary Period. During the initial days Recipient may terminate this Agreement at any time Furthermore, the Benefits listed in Section I of this Eithe Probationary Period.	without notice and without severance pay.
II. Overtime Pay . With very few exceptions, senior of workers, which entitles them to be paid for every hou must be paid for each hour worked over 40 in a 7-day.	ur they work. Overtime (time-and-a-half)
Generally, live-in employees are exempt from overting CA, HI, MD, MA, MN, ME, NJ and NY have special of Your caregiver is considered a live-in employee if the person they are caring for, or if they work 120 hours	overtime requirements for live-in employees. eir primary residence is the home of the
Caregiver's Signature	Date
Paciniant's Signatura	Doto