

Please be sure all information is completed and page totaled .

Form will be returned if there is missing information. This could delay payment.

Tutorial

NAME: _____

PDE ID #: _____

Building: Sr High

Account # 00007484

| Day | | START | STOP | Total Time |
|-----------|------|-------|------|------------|
| | Date | | | |
| Monday | | | | |
| Tuesday | | | | |
| Wednesday | | | | |
| Thursday | | | | |
| Friday | | | | |
| | | | | |
| Monday | | | | |
| Tuesday | | | | |
| Wednesday | | | | |
| Thursday | | | | |
| Friday | | | | |

PLEASE TOTAL

Employee signature

Date

Supervisor's signature

Date

PAYROLL DATE _____