CLERICAL SUBSTITUTE TIMESHEET

2019-2020

NAME	
ID #	
ADDRESS	
CITY, STATE, ZIP	

POSITIONCODERATERECEPTIONIST1\$12.06ATTENDANCE/COUNSELING/ASST PRINCIPAL SEC2\$12.36ADMINISTRATIVE SECRETARY3\$13.23

A STATE OF S		TIME	TIME	TIME	TIME	TOTAL #	RATE OF		AUTHORIZED	
DATE	BUILDING	ABSENTEE NAME	IN	OUT	IN	OUT	HOURS	PAY	CODE	SIGNATURE
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I certify that the	above repo	ort is correct	and acc	urate.

TIMESHEETS ARE DUE BY THE 3RD OF THE MONTH. LATE TIMESHEETS WILL BE HELD UNTIL THE FOLLOWING MONTH.