

CLASSIFIED TIMESHEET
Pacific Grove Unified School District

CLASSIFIED PAYROLL TIME SHEET

WORK PERFORMED:

Name of Employee: _____

Sub for Emp: _____ (name of employee that is out)

Month: _____ /

Year: _____ OT _____

				Last 4 of SS#		School or Department:			
Date	IN	OUT	TOTAL	Work Performed	Date	IN	OUT	TOTAL	Work Performed
1					16				
2					17				
3					18				
4					19				
5					20				
6					21				
7					22				
8					23				
9					24				
10					25				
11					26				
12					27				
13					28				
14					29				
15					30				
					31				
COLUMN TOTAL					COLUMN TOTAL				
					FINAL TOTAL				

Pay cycle: 16th of the month to the 15th of the following month. **SITE/DEPT DEADLINE: 16-31 DUE ON THE FIRST, BY 10 A.M., 1-15 DUE ON THE 16TH BY 10 AM.** All hourly, daily, or Other Work Pay must be approved by the District Payroll Office before payment can be made.

Fund	Resource	Year	Goal	Funct.	Object	Sub-Obj	Site	Program	Mgmt	Straight	OT HRS	Payroll USE

EMPLOYEE SIGNATURE _____

DATE _____

SUPERVISOR SIGNATURE _____

DATE _____