

- Comp Time (Classified Employees Only)
- Pay



EMPLOYEE EXTRA DUTY/SUBSTITUTE TIMESHEET

| Month | Day | Extra Duty Work Description/ Name of Teacher Substituting for | Site | Start time | End time | Total hours | Authorized By |
|----------------------|-----|--|------|---------------|-------------|----------------|---------------|
| | 1 | | | | | | |
| District Use: | | | | | | | |
| | 2 | | | | | | |
| District Use: | | | | | | | |
| | 3 | | | | | | |
| District Use: | | | | | | | |
| | 4 | | | | | | |
| District Use: | | | | | | | |
| | 5 | | | | | | |
| District Use: | | | | | | | |
| | 6 | | | | | | |
| District Use: | | | | | | | |
| | 7 | | | | | | |
| District Use: | | | | | | | |
| | 8 | | | | | | |
| District Use: | | | | | | | |
| | 9 | | | | | | |
| District Use: | | | | | | | |
| | 10 | | | | | | |
| District Use: | | | | | | | |
| | 11 | | | | | | |
| District Use: | | | | | | | |
| | 12 | | | | | | |
| District Use: | | | | | | | |
| | 13 | | | | | | |
| District Use: | | | | | | | |
| | 14 | | | | | | |
| District Use: | | | | | | | |
| | 15 | | | | | | |
| District Use: | | | | | | | |
| | 16 | | | | | | |
| District Use: | | | | | | | |

| Month | Day | Extra Duty Work Description/ Name of Teacher Substituting for | Site | Start time | End time | Total hours | Authorized By |
|---------------|-----|--|------|---------------|-------------|----------------|---------------|
| | 17 | | | | | | |
| District Use: | | | | | | | |
| | 18 | | | | | | |
| District Use: | | | | | | | |
| | 19 | | | | | | |
| District Use: | | | | | | | |
| | 20 | | | | | | |
| District Use: | | | | | | | |
| | 21 | | | | | | |
| District Use: | | | | | | | |
| | 22 | | | | | | |
| District Use: | | | | | | | |
| | 23 | | | | | | |
| District Use: | | | | | | | |
| | 24 | | | | | | |
| District Use: | | | | | | | |
| | 25 | | | | | | |
| District Use: | | | | | | | |
| | 26 | | | | | | |
| District Use: | | | | | | | |
| | 27 | | | | | | |
| District Use: | | | | | | | |
| | 28 | | | | | | |
| District Use: | | | | | | | |
| | 29 | | | | | | |
| District Use: | | | | | | | |
| | 30 | | | | | | |
| District Use: | | | | | | | |
| | 31 | | | | | | |
| District Use: | | | | | | | |

I declare under penalty of perjury that this is true and correct record of work I have done.

Print Name _____ Signature _____

SSN (last four) _____ Date _____ **EMPLOYEES ONLY:** Regular Work Hours _____ a.m. to _____ p.m.

**I UNDERSTAND IT IS MY RESPONSIBILITY TO SUBMIT THIS FORM TO THE BUSINESS OFFICE
ON THE LAST WORKING DAY OF THE MONTH**