APPENDIX #1

STIPEND TIME SHEET

DATE: _____

NAME: _____
(Please Print)

POSITION : _____

SCHOOL: _____

BUDGET CODE: _____

BOARD APPROVAL DATE: _____

ACTIVITY DESCRIPTION	DATE	IN	OUT	# HOURS	RATE	TOTAL	SIGNATURE

TOTAL _____

NOTE: If this payroll is associated with:
a) Team meeting, please attach a copy of the agenda and minutes.
b) Student activities, please attach the students' attendance form.

PRINCIPAL: _____ DATE: _____

OR

DIRECTOR: _____ DATE: _____

ASST. BUSINESS ADMINISTRATOR: _____ DATE: _____

ORANGE BOARD OF EDUCATION TIMESHEET

NAME: _____

DEPARTMENT: _____

DATE	TIME IN	TIME OUT	TOTAL HOURS

TOTAL HOURS _____

Supervisor's Signature: _____

Date: _____

HOURLY TIME SHEET

APPENDIX # 3

DATE: _____ SCHOOL: _____

NAME: _____ POSITION: _____
(Please Print)

PAY PERIOD: _____ BUDGET CODE: _____

DATE	IN	OUT	# HOURS	RATE	TOTAL	SIGNATURE

TOTAL _____ _____

PRINCIPAL: _____ DATE: _____

DIRECTOR: _____ DATE: _____

ASST. BUSINESS ADMINISTRATOR: _____ DATE: _____