CARBONDALE AREA SCHOOL DISTRICT

INDIVIDUAL TIME SHEET

PAY PERIOD: FROMTO			TO	ΓΟ		
NAME OF	EMPLOYEE:					
	POSITION	HELD: <u>CONT</u>	RACTED DR	<u> ZIVER</u>		
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	TOTAL DAYS	
DATE	DATE	DATE	DATE	DATE		
DATE	DATE	DATE	DATE	DATE		
	IOUR \$		ТОТА	AL DAYS		
EMPLOYEE SIGNATURE				DATE		
PRI	INCIPAL					
TICE:						
is sheet must l partment on th	ne <u>Friday befo</u>	pre pay day.				
time sheet is i	not received b	oy due date you	will			

not be paid until the following Pay Day.

