

EAST CARTER R-II SCHOOLS

AFTER HOURS TIME SHEET

NAME: \_\_\_\_\_

MONTH: \_\_\_\_\_

BUILDING: \_\_\_\_\_

DESCRIPTION OF DUTY PERFORMED: \_\_\_\_\_

DATE	DESCRIPTION	TIME IN-OUT	HOURS

TOTAL HOURS: \_\_\_\_\_ RATE OF PAY: \_\_\_\_\_per hour TOTAL DUE: \_\_\_\_\_

EMPLOYEE SIGNATURE: \_\_\_\_\_

ADMINISTRATOR SIGNATURE: \_\_\_\_\_

SUPERINTENDENT SIGNATURE: \_\_\_\_\_