

Last Name \_\_\_\_\_

Print

First Name \_\_\_\_\_

Print

Employee ID# \_\_\_\_\_

### 11-10th Time Sheet

Month \_\_\_\_\_ Year \_\_\_\_\_

### Payroll Time Sheet

### Lane Education Service District

DATE	Hours				DATE	Hours			
	Regular	Leave		Additional or Overtime		Regular	Leave		Additional
	Regular Hours	Leave Hours	Type	Additional Hours		Regular Hours	Leave Hours	Type	Additional Hours
<i>*Hours over the Normal Shift are Additional hours Overtime is based on hours actually worked (hours over 40 minus paid holiday or paid leaves)*</i>									
11					27				
12					28				
13					29				
14					30				
15					31				
16					1				
17					2				
18					3				
19					4				
20					5				
21					6				
22					7				
23					8				
24					9				
25					10				
26					TOTAL				

Record number of hours worked, number of hours of leave taken and/or number of hours of additional time for each working day of the month. Identify type of leave taken by putting the proper symbol in the small box next to the hours.

Types of Leaves and Earnings	
V - Vacation	P - Personal Leave
S - Sick Leave	L - Leave Without Pay
F - Family Illness	O - On the Job Injury
H - Holiday	B - Bereavement Leave
J - Jury Duty	A - Association Leave
RA - Reassignment Bonus	
NC - Non Contract Day	

I hereby certify that this is a true and correct report of the time I have worked during the dates indicated.

\_\_\_\_\_  
Employee Signature                      Date

\_\_\_\_\_  
Verification Signature                      Date

For ESD Use Only		
Additional Hours _____ x _____ = _____	Overtime Hours _____ x _____ = _____	Acct# _____