

Nelsonville-York City Schools

Time Sheet

Employee Name

	Date	Time Started	Time Stopped	Regular Hours	Overtime Hours	Description
Sunday						
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Total Hours Worked						

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Superintendent Signature: _____ Date: _____

For Treasurer's Office Use

Hours: _____ Rate: _____ Total: _____ Account Code: _____

Hours: _____ Rate: _____ Total: _____ Account Code: _____

Hours: _____ Rate: _____ Total: _____ Account Code: _____