

Bridgehampton Public School

Employee Time Sheet Please submit ORIGINAL to Business Office

NAME _____

Payroll No.: _____

USE "PEN" ONLY TO FILL OUT THIS FORM

BUDGET CODE (PLEASE CHECK ONE)	
<input type="radio"/> 1060.168 Election Workers <input type="radio"/> 1620.160 Custodial – Non Instructional <input type="radio"/> 1620.164 Custodial Substitutes <input type="radio"/> 1620.165 Custodial Overtime <input type="radio"/> 2020.140 Clerical – Non Instructional <input type="radio"/> 2110.110 Pre K Teacher Salaries <input type="radio"/> 2110.120 K-6 Teacher Salaries <input type="radio"/> 2110.130 7-12 Teacher Salaries	<input type="radio"/> 2110.140 Substitute Teachers Salaries <input type="radio"/> 2110.168 Student Workers <input type="radio"/> 2250.150 Special Education Salaries <input type="radio"/> 2330.150 Teaching Special – Instructional <input type="radio"/> 2850.150 Co-Curricular – Instructional <input type="radio"/> 2855.150 Interscholastic – Instructional <input type="radio"/> 2330.160 Adult Education <input type="radio"/> Other _____ Description of Duties

Date	Time worked From	Time Worked to	Total Hours	Please Specify Reason	MUST BE COMPLETED

TOTAL HOURS _____ **OVERTIME ABOVE PRE- APPROVED** _____
Authorized Signature

Requesting Comp. Time for extra time worked _____
 (Please initial to indicate earning of comp time in lieu of overtime)

I hereby certify that I have worked these hours.

Employee Signature	Date
<i>FOR BUSINESS OFFICE USE ONLY</i>	
Principal’s Signature (classroom staff only)	Date
Superintendent’s Signature	Date
Business Administrator Signature	Date

_____ X _____ =

Total Hours/Days X Rate of Pay =

Payment Due: \$ _____

The Payroll Schedule is on the back side of the time sheet and indicates due dates for BUSINESS OFFICE. Time Sheets received after the due date will be processed on the following payroll.