Hamilton Township Board of Education

TIMESHEET

1876 Dr. Dennis Foreman Drive Mays Landing, NJ 08330 (609) 476-6306

Employee Name:			School:
(<u>Print</u> name cle	arly as it appears o	on your pay.)	
Pay Period:	-		Pay Date:
*Failure to complete form properly and legibly could delay payment!			
<u>Day</u>	<u>Date</u>	<u>Hours/Days</u>	Type of work completed
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Total Hours/Days:			
	Rate:		
	Total Pay:		
Employee Signature:			Date:
(Employee Responsibility - Complete form and give to Supervisor for their signature)			
Supervisor Signature:			Date:
(Supervisor Responsibilty - Your signature verifies total and rate of pay. Add account to be charged)			

Account to be charged: