

Treasurer's Office Use Only	
Total Hours	_____
\$54/hr first hour of each day	_____
\$26/hr each remaining hour/day	_____
Total Paid	_____

NURSE

SERVICES RENDERED TIMESHEET

Pay period start date: 1/20/2024

Pay period end date: 2/5/2024

02/20/2024 pay date

Print Name: _____

Student's Name(s): _____

Day		Start Time	End Tme	Total Hours
Saturday	1/20/2024			
Sunday	1/21/2024			
Monday	1/22/2024			
Tuesday	1/23/2024			
Wednesday	1/24/2024			
Thursday	1/25/2024			
Friday	1/26/2024			
Saturday	1/27/2024			
Sunday	1/28/2024			
Monday	1/29/2024			
Tuesday	1/30/2024			
Wednesday	1/31/2024			
Thursday	2/1/2024			
Friday	2/2/2024			
Saturday	2/3/2024			
Sunday	2/4/2024			
Monday	2/5/2024			
Total Hours for Pay Period				

Client Signature (Designee)

Date

Administrator signature

Date

Approval must be obtained from the Building Principal prior to submission to the Treasurer's Office for payment.