

# LEXINGTON SCHOOLS

Pay period start date: 1/21/2015  
 Pay period end date: 2/5/2015

Employee: \_\_\_\_\_

Any extra hours worked will  
 be paid on the  
 Feb 20, 2015 pay date

Day		Start	Stop	Total Regular	Start	Stop	Total Over Time
Wednesday	1/21/2015						
Thursday	1/22/2015						
Friday	1/23/2015						
Saturday	1/24/2015						
Sunday	1/25/2015						
Monday	1/26/2015						
Tuesday	1/27/2015						
Wednesday	1/28/2015						
Thursday	1/29/2015						
Friday	1/30/2015						
Saturday	1/31/2015						
Sunday	2/1/2015						
Monday	2/2/2015						
Tuesday	2/3/2015						
Wednesday	2/4/2015						
Thursday	2/5/2015						

Employee signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR TREASURER'S OFFICE USE ONLY**

Total Substitute hours _____ at rate of \$ _____ = \$ _____
Total Straight-Time hours _____ at rate of \$ _____ = \$ _____
Total Over-Time hours _____ at rate of \$ _____ = \$ _____