

LEXINGTON SCHOOLS

Pay period start date: 1/21/2016
 Pay period end date: 2/5/2016

Employee: _____

Any extra hours worked will
 be paid on the
 Feb 19, 2016 pay date

| Day | | Start | Stop | Total Regular | Start | Stop | Total Over Time |
|-----------|-----------|-------|------|---------------|-------|------|-----------------|
| Thursday | 1/21/2016 | | | | | | |
| Friday | 1/22/2016 | | | | | | |
| Saturday | 1/23/2016 | | | | | | |
| Sunday | 1/24/2016 | | | | | | |
| Monday | 1/25/2016 | | | | | | |
| Tuesday | 1/26/2016 | | | | | | |
| Wednesday | 1/27/2016 | | | | | | |
| Thursday | 1/28/2016 | | | | | | |
| Friday | 1/29/2016 | | | | | | |
| Saturday | 1/30/2016 | | | | | | |
| Sunday | 1/31/2016 | | | | | | |
| Monday | 2/1/2016 | | | | | | |
| Tuesday | 2/2/2016 | | | | | | |
| Wednesday | 2/3/2016 | | | | | | |
| Thursday | 2/4/2016 | | | | | | |
| Friday | 2/5/2016 | | | | | | |

Employee signature _____ Date _____

Supervisor signature _____ Date _____

FOR TREASURER'S OFFICE USE ONLY

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