

LEXINGTON SCHOOLS

Pay period start date: 7/4/2025
 Pay period end date: 7/18/2025

Employee: _____

Any extra hours worked will
 be paid on the
 Aug 5, 2025 pay date

| Day | | Start | Stop | Total Regular | Start | Stop | Total Over Time |
|-----------|-----------|-------|------|---------------|-------|------|-----------------|
| Friday | 7/4/2025 | | | | | | |
| Saturday | 7/5/2025 | | | | | | |
| Sunday | 7/6/2025 | | | | | | |
| Monday | 7/7/2025 | | | | | | |
| Tuesday | 7/8/2025 | | | | | | |
| Wednesday | 7/9/2025 | | | | | | |
| Thursday | 7/10/2025 | | | | | | |
| Friday | 7/11/2025 | | | | | | |
| Saturday | 7/12/2025 | | | | | | |
| Sunday | 7/13/2025 | | | | | | |
| Monday | 7/14/2025 | | | | | | |
| Tuesday | 7/15/2025 | | | | | | |
| Wednesday | 7/16/2025 | | | | | | |
| Thursday | 7/17/2025 | | | | | | |
| Friday | 7/18/2025 | | | | | | |

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 \$ _____ | = \$ _____ | |