

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

# NURSE

## SERVICES RENDERED TIMESHEET

Pay period start date: 7/19/2025

Pay period end date: 8/5/2025

08/20/2025 pay date

Print Name: \_\_\_\_\_

Student's Name(s): \_\_\_\_\_

Day		Start Time	End Tme	Total Hours
Saturday	7/19/2025			
Sunday	7/20/2025			
Monday	7/21/2025			
Tuesday	7/22/2025			
Wednesday	7/23/2025			
Thursday	7/24/2025			
Friday	7/25/2025			
Saturday	7/26/2025			
Sunday	7/27/2025			
Monday	7/28/2025			
Tuesday	7/29/2025			
Wednesday	7/30/2025			
Thursday	7/31/2025			
Friday	8/1/2025			
Saturday	8/2/2025			
Sunday	8/3/2025			
Monday	8/4/2025			
Tuesday	8/5/2025			
<b>Total Hours for Pay Period</b>				

\_\_\_\_\_  
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.**