

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: 10/5/2024

Pay period end date: 10/18/2024

11/05/2024 pay date

Print Name: _____

Student's Name(s): _____

Day		Start Time	End Time	Total Hours
Saturday	10/5/2024			
Sunday	10/6/2024			
Monday	10/7/2024			
Tuesday	10/8/2024			
Wednesday	10/9/2024			
Thursday	10/10/2024			
Friday	10/11/2024			
Saturday	10/12/2024			
Sunday	10/13/2024			
Monday	10/14/2024			
Tuesday	10/15/2024			
Wednesday	10/16/2024			
Thursday	10/17/2024			
Friday	10/18/2024			
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.