

<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: 4/18/2025

Pay period end date: 5/5/2025

05/20/2025 pay date

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

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

Day		Start Time	End Tme	Total Hours
Friday	4/18/2025			
Saturday	4/19/2025			
Sunday	4/20/2025			
Monday	4/21/2025			
Tuesday	4/22/2025			
Wednesday	4/23/2025			
Thursday	4/24/2025			
Friday	4/25/2025			
Saturday	4/26/2025			
Sunday	4/27/2025			
Monday	4/28/2025			
Tuesday	4/29/2025			
Wednesday	4/30/2025			
Thursday	5/1/2025			
Friday	5/2/2025			
Saturday	5/3/2025			
Sunday	5/4/2025			
Monday	5/5/2025			
<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.**