School District of Lodi Timesheet

Em	ployee Name:	Month:				
Sch	nool/Location:	Period Ended (circle):	15 / 30			
1.	Number of hours should be reported in fractions to the closest quarter-hour (examples: 5.25 / 5.5	5 / 5.75)				
2.	Time should be filled in daily and reviewed before submitting.					
3.	Original timesheet, signed and dated, should be submitted to supervisor for approval & signature					

Supervisors will sign & submit to the Business Office.

Employee's Signature

Date Submitted

	Worked e date)	Time work began	Time work ended	Lunch/ break taken	Total number of hours worked	Sub Hours (non- contract) (specify!)	Manage- ment	*Give Reason for Overtime * Indicate who subbed for *Indicate reason for variance in hours	Sick Leave Hours	PTO Hours	Vacation Leave Hours	Holiday Hours	School Business Hrs
1	16												
2	17												
3	18			1		7							
4	19			//									
5	20			III		1							
6	21			/									
7	22									74			
8	23		- //			2							
9	24		//						M				
10	25								1				
11	26												
12	27												
13	28												
14	29												
15	30												
	31												
TOTAL HOURS:					*Total Hours should equal regular hrs plus overtime hrs.								
			GULAR HRS:										
OVERTIME HRS:				*overtime hours equals any time over 40 hours per week.									

Supervisor's Approval