	А	В	С	D	Е	F	G	Н	ı	J	K		L
1				•		Haverhi	Il Public	Schools	;				
2	RESPONSIBILITY CENTER Administrator Payroll Report PP 24												
3											, 1		
4 5	Department Name:	ie:							Two week period ended:				5/23/2020
6		APPROVED BY:						launta via an					
	Period Begins: 5/10	APPROVED BY:						SUPERVISOR:			OR:		
8			1	1		ı	1				I I I a contra		
9	Period Ends: 5/23	P/R Dept # Hourly/Salar y (H/S)		5/10 5/17 Sun	5/11 5/18 Mon	5/12 5/19 Tues	5/13 5/20 Wed	5/14 5/21 Thurs	5/15 5/22 Fri	5/16 5/23 Sat	Hourly employees # hours worked		
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10	Employee Name:		k 1										
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12	Employee Name:		1										
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