	А	В	С	D	E	F	G	Н	I	J	K	L	
1	7				ı	Haverhill	l Public	Schools					
2	RESPONSIBILITY CENTER Administrator Payroll Report PP 19												
3											_		
4 5 6	Department Name:							Two week period					3/16/2019
0	Period Begins: 3/3	APPROVED	APPROVED BY:						SUPERVISOR:				
7													
8				1	1		1	1	r				
9	Period Ends: 3/16	P/R Dept # Hourly/Salar y (H/S)		3/3 3/10 Sun	3/4 3/11 Mon	3/5 3/12 Tues	3/6 3/13 Wed	3/7 3/14 Thurs	3/8 3/15 Fri	3/9 3/16 Sat	Hourly employees # hours worked		
			W										
10	Employee Name:		k 1										
	Initals		W										
			k 2										
11			W										
			k										
12	Employee Name:		1										
	Initals		w										
			k										
13			2										
			w k										
14	Employee Name:		1										
	Initals		W										
			k										
15			2		<u> </u>		1						
			w k										
16	Employee Name:		1										
	Initals		w										
			k										
17			2										
			W										
10	Employee Name:		k 1										
18	Initals		W										
			k										
19			2										