



# Haverhill Public Schools BiWeekly Payroll Timesheet



School/Department:	Principal/Supervisor Name:	Principal/Supervisor Signature:	Account # ????????.4.?????????.???.???.???.???
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**Pay Period: 7**

Start Date: 9/10/2023

End Date: 9/23/2023

**Pay Date 9/29/2023**

**DUE:  
9/22/2023**

		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
Employee Name:  Employee Signature:	Wk 1	9/10/2023	9/11/2023	9/12/2023	9/13/2023	9/14/2023	9/15/2023	9/16/2023	Weekly Total	
	Wk 2	9/17/2023	9/18/2023	9/19/2023	9/20/2023	9/21/2023	9/22/2023	9/23/2023		
Time Entry Description/Job Performed:  Notes: (for office use only)	Week 1								Weekly Total	Grand Total
	Week 2								Weekly Total	

Employee Name:  Employee Signature:	Week 1								Weekly Total	
	Week 2									

Employee Name:  Employee Signature:	Week 1								Weekly Total	
	Week 2									

This certifies the above has worked 100% of his/her time for this pay period on the Federal grant program listed above.

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