



Haverhill Public Schools BiWeekly Payroll Timesheet



School/Department:	Principal/Supervisor Name:	Principal/Supervisor Signature:	Account # ??????.4.?????????????? ----- . 4 -----
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Pay Period: 1

Start Date: 6-16-2024

End Date: 6-29-2024

Pay Date 7-5-2024

DUE:
6-28-2024

		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
		6-16-2024	6-17-2024	6-18-2024	6-19-2024	6-20-2024	6-21-2024	6-22-2024		
	Wk 1								Weekly Total	
Employee Legal Name:	Week 1								<input style="width: 100%; height: 100%;" type="text"/>	
Employee Signature:										
Time Entry Description/Job Performed:	Week 2								Weekly Total	Grand Total
Notes: (for office use only)									<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>

	Week 1								Weekly Total	
Employee Legal Name:	Week 1								<input style="width: 100%; height: 100%;" type="text"/>	
Employee Signature:										
Time Entry Description/Job Performed:	Week 2								Weekly Total	<input style="width: 100%; height: 100%;" type="text"/>
Notes: (for office use only)									<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>

	Week 1								Weekly Total	
Employee Legal Name:	Week 1								<input style="width: 100%; height: 100%;" type="text"/>	
Employee Signature:										
Time Entry Description/Job Performed:	Week 2								Weekly Total	<input style="width: 100%; height: 100%;" type="text"/>
Notes: (for office use only)									<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>

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