



Haverhill Public Schools BiWeekly Payroll Timesheet



School/Department:	Principal/Supervisor Name:	Principal/Supervisor Signature:	Account # ????????.4.?????????.???.???.???. ----- 4 -----
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Pay Period: 6

Start Date: 8-25-2024

End Date: 9-7-2024

Pay Date 9-13-2024

DUE:
9-6-2024

		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
		8-25-2024	8-26-2024	8-27-2024	8-28-2024	8-29-2024	8-30-2024	8-31-2024		
Employee Legal Name:	Wk 1								Weekly Total	
	Week 1									
Employee Signature:										
Time Entry Description:	Wk 2								Weekly Total	Grand Total
	Week 2									
Notes: (for office use only)										

Employee Legal Name:	Wk 1								Weekly Total	
	Week 1									
Employee Signature:										
Time Entry Description:	Wk 2								Weekly Total	
	Week 2									
Notes: (for office use only)										

Employee Legal Name:	Wk 1								Weekly Total	
	Week 1									
Employee Signature:										
Time Entry Description:	Wk 2								Weekly Total	
	Week 2									
Notes: (for office use only)										

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