

* Indicates Required Field



Haverhill Public Schools
BiWeekly Payroll Timesheet



* School/Department:	* Principal/Supervisor Name:	* Principal/Supervisor Signature:	* Account # ????????.4.?????????.???.???.???.???. -----4.-----
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Pay Period: **26**

Start Date: 06/07/2026

End Date: 06/20/2026

Pay Date **06/26/2026**

DUE:
06/18/2026

		<u>Sunday</u>	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>		
	Wk 1	06/07/2026	06/08/2026	06/09/2026	06/10/2026	06/11/2026	06/12/2026	06/13/2026		
	Wk 2	06/14/2026	06/15/2026	06/16/2026	06/17/2026	06/18/2026	06/19/2026	06/20/2026		
* Employee LEGAL Name: * PRINT: Last, First, Mid Int	Week 1								* Weekly Total	
* Employee Signature:										
* Time Entry Description/ Specified Job Title:	Week 2								* Weekly Total	* Grand Total
Notes: (for office use only)										

* Employee LEGAL Name: * PRINT: Last, First, Mid Int	Week 1								* Weekly Total	
* Employee Signature:										
* Time Entry Description/ Specified Job Title:	Week 2								* Weekly Total	* Grand Total
Notes: (for office use only)										

* Employee LEGAL Name: * PRINT: Last, First, Mid Int	Week 1								* Weekly Total	
* Employee Signature:										
* Time Entry Description/ Specified Job Title:	Week 2								* Weekly Total	* Grand Total
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