

12 MONTH EMPLOYMENT PAYROLL
 (TO INCLUDE PRINCIPALS, OFFICE MANAGERS, ETC.)

MONTH: _____

SCHOOL: _____

PAYROLL FROM: _____ To: _____

NAME	EMP #	INITIAL	TOTAL NUMBER OF DAYS ABSENT	LIST DATE(S) OF ABSENCE IN PROPER COLUMN					
				SICK	VACATION	PERSONAL	MILITARY LEAVE	JURY DUTY	LEAVE WITHOUT PAY
