

ROBERTSON COUNTY SCHOOLS
SPECIAL PAY REQUEST
Support Personnel

School _____

Principal's Signature: _____

Sponsor's Signature: _____

Employee's Name/Signature: _____

Duty Performed _____

Date Performed _____

Pay _____

FICA _____ 0.00 7.65%

Retirement _____ 0.00 6.08% (Support)

Mileage _____ 0.00

Clean Up Fee _____

Total Enclosed _____ \$0.00

Date Paid: _____ Check #: _____

This portion only for special bus trips:

Bus Number: _____

Ending Mileage: _____

Beginning Mileage: _____

\$1.75 - large
\$1.50 - small

Total Miles: _____ 0 @ _____ 1.75 = _____ \$0.00

Dispatcher's Signature: _____