HACIENDA LA PUENTE UNIFIED SCHOOL DISTRICT
15959 East Gale Ave., City of Industry, CA 91716 – Payroll Department (626) 933-3871

OTHER EMPLOYEE - CERTIFICATED

Each Month Must be on Separate Timesheets!!

_____ _____ _____
Print Name (Last, First) Full SS#/EID# **(Required)** MONTH-YEAR

Refer to Payroll Schedule for timesheet due date. SACS code are REQUIRED from each site. Please see site administrator for SACS code**.**

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CLASSIFICATION **(Required)**

EMPLOYEE IS RESPONSIBLE FOR PROVIDING ORIGINAL TIMESHEET TO THE PAYROLL DEPARTMENT

Date	Number of Days or Hours		Place and Reason	SACS Code (REQUIRED)	Approved By:

Total Days/Hours _____

EMPLOYEE'S SIGNATURE _____
(REQUIRED)