Emanuel County Schools

Hourly Time Sheet

This form must be completed and returned to the Central Office Payroll Dept. by the 15th of each month before payment can be made.

Position Worked _____ Employee Name: _____

Date	A.M.		P.M.		HOURS	Employee's Initials
	In	Out	In	Out		
				TOTAL HOURS		

Date		Employee's Signature	
Position Worked		Supervisor's Signature	

Date		Director's Signature	
Funding Source			