



BAKERSFIELD CITY SCHOOL DISTRICT
EDUCATION CENTER - 1300 BAKER ST. - BAKERSFIELD, CA – 93305
FISCAL SERVICES – PAYROLL DIVISION

TIMESHEET ENDORSEMENT

Please complete the following designating representatives from your school/department for signing timesheets, and picking up department checks.

School Site/ Department Name: _____ Location #: _____

Principal/Department Head Printed Name: _____

Employee No. 1

Designated Representative: _____ EID #: _____

Designated Representative Job Title: _____

Designated Representative Signatures: _____

Employee No. 2

Designated Representative: _____ EID #: _____

Designated Representative Job Title: _____

Designated Representative Signatures: _____

Employee No. 3

Designated Representative: _____ EID #: _____

Designated Representative Job Title: _____

Designated Representative Signatures: _____

Principal/Department Head Signature: _____

Date: _____

**NOTE: ONLY PRINCIPALS AND DEPARTMENT HEADS MAY SIGN THE
TIMESHEET OR ABSENCE REPORT. ALL OTHER PERSONNEL INCLUDED ON
THIS FORM ARE ONLY AUTHORIZED TO PICK UP CHECKS.**

**RETURN TO:
DEPARTMENT OF FISCAL SERVICES
PAYROLL SUPERVISOR**