I.S.D # 2534 BOLD Public Schools
DAILY TIMESHEET

Name_____
Period: _____
Assignment: _____

Include all leave and holiday pay on timesheet!

	REGULAR HOURS					
DATE	IN	OUT	IN	OUT	Total Reg. Hours	Total O.T. Hours
					TOTAL HRS	

By signing, you are agreeing to the above stated hours.

Employee Signature: _____
Supervisor Signature: _____

Approved:1/4/06

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