Employee Name: _____
(Please Print)

HAMILTON COUNTY COMMUNITY UNIT DISTRICT NO 10

CAFETERIA (SUB)

MONTHLY TIMESHEET
PAYROLL PERIOD_____

DATE	TIME IN	TIME OUT	TIME IN	TIME OUT	SUB HRS	SUBBED FOR

EMPLOYEE SIGNATURE SUPERVISOR SIGNATURE

Please turn time sheet in to your building principal by the 10th of each month.
You will be paid monthly. Payments will be made on the 20th payroll of the month.
Payroll period should be 11th of first month thru the 10th of the following month (mo/11/20## - mo/10/20##).