## La Center School District No. 101

725 Highland Road/PO Box 1840, La Center, WA 98629 Phone: 360.263.2131/Fax: 360.263.1140

## **Supplemental Contract Documentation of Time Worked**

Employee #: Employee Name:												Employee Position:																					
Sept. Hours	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30		Total	Verified
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Dec.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total	Verified
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July	1	2	2			6	7			10	44	42	12	1.1	15	16	17	10	10	20	21	22	23	24	25	26	27	28	29	30	21	Total	Verified
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Aug.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total	Verified
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Payroll Verification  Date Received: Payroll Date: Warrant#: Initial Date: Warrant#: Initial Date: Warrant#: Initial Date: Initial Date: Warrant#: Initial Date: Initial Date: Warrant#: Initial Date: Warrant#: Initial Date: Initial Date: Initial Date: Warrant#: Initial Date: Initial												Initi	ale.																				

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<sup>\*</sup>Verified-Employee is responsible for obtaining supervisor's signature at the end of each month worked.