

LAKESIDE SCHOOL DISTRICT
EMPLOYEE TIME CARD

NAME _____ DESCRIPTION OF WORK _____
Example: tutoring, detention, PD

ADDRESS _____ CITY _____

MONTH WORK COMPLETED _____ SOCIAL SECURITY # _____

DAY	IN	OUT	IN	OUT	IN	OUT	IN	OUT	TOTAL
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
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23									
24									
25									
26									
27									
28									
29									
30									
31									
TOTAL HOURS WORKED FOR MONTH									

EMPLOYEE SIGNATURE _____ DATE _____

SUPERVISOR'S SIGNATURE _____ DATE _____