



NORTH CENTRAL

Education Service District

Employee Time Sheet

Employee Name: _____

Pay Period: _____ Through _____

Month	Date	Hours	Comments
_____	19	_____	_____
	20	_____	_____
	21	_____	_____
	22	_____	_____
	23	_____	_____
	24	_____	_____
	25	_____	_____
	26	_____	_____
	27	_____	_____
	28	_____	_____
	29	_____	_____
	30	_____	_____
	31	_____	_____

Month	Date	Hours	Comments
_____	1	_____	_____
	2	_____	_____
	3	_____	_____
	4	_____	_____
	5	_____	_____
	6	_____	_____
	7	_____	_____
	8	_____	_____
	9	_____	_____
	10	_____	_____
	11	_____	_____
	12	_____	_____
	13	_____	_____
	14	_____	_____
	15	_____	_____
	16	_____	_____
	17	_____	_____
	18	_____	_____

Total Hours _____

Employee Signature

Supervisor's Signature