## TRANSPORTATION SUBSTITUTE TIMESHEET

2024-2025

NAME		
ID #		
ADDRESS		
CITY, STATE, ZIP		
POSITION	CODE	RATE
BUS DRIVER	1	\$19.62

DATE	BUILDING	ABSENTEE NAME	TIME IN	TIME OUT	TIME IN	TIME OUT	TOTAL # HOURS	RATE OF PAY	CODE	AUTHORIZED SIGNATURE

\$17.08

I certify that the above report is correct and accurate.

**BUS PARA** 

Substitute Signature\_\_\_\_\_

TIMESHEETS ARE DUE BY THE 3RD OF THE MONTH. LATE TIMESHEETS WILL BE HELD UNTIL THE FOLLOWING MONTH.