

RED BLUFF UNION ELEMENTARY SCHOOL DISTRICT

CLASSIFIED **SUBSTITUTE** TIMESHEET

Timesheets are to be signed by your supervisor and turned into the front office on the last day of the month.

Name: _____

Address: _____

Phone: _____

Month/Year: _____

Site/Dept: Bidwell Metteer Jackson Heights

Vista ELOP District Office / Maint. / Tech.

Work Performed: _____

Date	In	Out	In	Out	Substituting For:	Total Hours Worked
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						

Date	In	Out	In	Out	Substituting For:	Total Hours Worked
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
TOTAL HOURS FOR THE MONTH						

Employee Signature _____ Date _____

Supervisor Signature _____ Date _____

For Office Use Only				
Add-On	Hours	Rate	Total	Account Code
Add-On	Hours	Rate	Total	Account Code
PURPLE Total Paid:			EE ID # _____	