

# Clarendon School District Two

## Employee Timesheet

**Dept or School:** \_\_\_\_\_

**Employee Name:** \_\_\_\_\_

**Work Description:** \_\_\_\_\_  
 \_\_\_\_\_

**Account Number(s):** \_\_\_\_\_

(Timesheets submitted without an Acct # may result in a delay of pay)

Date	Additional Notes (optional) Include In/Out Time if pay is hourly	Total # of Hours / Days
<b>Total # of Hours / Days:</b>		

**Employee Sign & Date:** \_\_\_\_\_

**Supervisor Signature:** \_\_\_\_\_  
 (required)

Payroll Scheduled Pay Dates information is on the District Website, which includes timesheet deadlines.