Meadows Union School District

					lin	ne Sheet			
Name:						Schedule:			
Social Secu	rity #: xxxx-xx	-							
Da	ate	Time In	Time Out	Time In	Time Out	Total	Assignment	For Position/ Staff/ Dept	
					Total Hours:	0.00			
For Positio Please Not List one as		ne staff, pos ine. Examp	sition or depa le: morning a	rtment for th ssignment v	er Time, Stiper le assignment vith MOT and	nd, Substitu		parate lines	
						roll Use ONL	Y:		
Rate:	Hrs.	Earn	ings:		Add-on/ Acct.				
Rate:	Hrs.		ings:		Add-on/ Acct.	Line:			
Rate:	Hrs.	Earn	ings:		Add-on/ Acct.	Line:			
Rate:	Hrs.	Earn	ings:		Add-on/ Acct.	Line:			
hereby cer have fully l	tify that the tim knowledge of 1	ne recorded 100 percent	on this times of these activ	sheet is an a vities.	fter-the-fact de	eterminatio	n of actual effort expend	ded for the period indicted and	d that
			D.t.				Companying and a Circumstance		D.4
mployee's Si	ignature		Date				Supervisor's Signature		Date

Second Signature (if necessary)