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| **JACKSON COUNTY SCHOOLS****DAILY SUBSTITUTE CHECK-IN LIST** |
| School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| Date | Substitute Name | Absent Employee | Time-In | Time-Out | Job # |
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Page \_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_ I hereby certify the above to be a true and accurate report:

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