SUBSTITUTE TIMESHEET

MACON COUNTY BOARD OF EDUCATION

NAME						
PAY PERI	OD FROM MO	ONTH DAY	_ THROUGH MO	NTH / DAY /	YEAR	
OF THE MEND OF T	ONTH. SUBS HE MONTH P.	TITUTE CHECK AYROLL. ALL S	THE 15 TH , AND TI S WILL BE RUN (SUBS MUST HAVI D OSHA FOR THE	ONCE MONTHL E A CURRENT A	Y WITH THE APPLICATION	
DATE	SCHOOL		TUTE FOR: G. EMPLOYEE	POSITION	TIME WORKED	
TD (EQUE)		DIETH OF THE	AL OFFICE WARM	DIA DAVIGOS		
	ETS ARE DUE NDING DATE		AL OFFICE WITH	IN 2 DAYS OF I	PAYROLL	
SUBSTITUTE SIGNATURE			APPROV	APPROVED BY DATE		