

**PIKELAND COMMUNITY UNIT SCHOOL DISTRICT #10
SUBSTITUTE BUS DRIVER PAY REPORT SHEET**

FILL OUT and retain one copy for your files and return the other copy to the Board of Education Office by the first of each month for work during the preceding month.

MONTH: _____ YEAR: _____

	Dates		Name of Regular Driver	Regular Route	Kinder-Garten Route	Early Childhood Route
	Mark with an "X"					
	AM	PM				
1	___	___	_____	_____	_____	_____
2	___	___	_____	_____	_____	_____
3	___	___	_____	_____	_____	_____
4	___	___	_____	_____	_____	_____
5	___	___	_____	_____	_____	_____
6	___	___	_____	_____	_____	_____
7	___	___	_____	_____	_____	_____
8	___	___	_____	_____	_____	_____
9	___	___	_____	_____	_____	_____
10	___	___	_____	_____	_____	_____
11	___	___	_____	_____	_____	_____
12	___	___	_____	_____	_____	_____
13	___	___	_____	_____	_____	_____
14	___	___	_____	_____	_____	_____
15	___	___	_____	_____	_____	_____
16	___	___	_____	_____	_____	_____
17	___	___	_____	_____	_____	_____
18	___	___	_____	_____	_____	_____
19	___	___	_____	_____	_____	_____
20	___	___	_____	_____	_____	_____
21	___	___	_____	_____	_____	_____
22	___	___	_____	_____	_____	_____
23	___	___	_____	_____	_____	_____
24	___	___	_____	_____	_____	_____
25	___	___	_____	_____	_____	_____
26	___	___	_____	_____	_____	_____
27	___	___	_____	_____	_____	_____
28	___	___	_____	_____	_____	_____
29	___	___	_____	_____	_____	_____
30	___	___	_____	_____	_____	_____
31	___	___	_____	_____	_____	_____

Print Name: _____

Signature: _____

2019-2020

<i>Office Use Only</i>	
<i>LR</i> _____	@ \$102.59
<i>SE</i> _____	@ \$79.63
<i>KR</i> _____	@ \$40.58
<i>HR</i> _____	@ \$79.63
<i>Other</i> _____	@ _____