

HAMPSHIRE COUNTY BOARD OF EDUCATION
SERVICE PERSONNEL TIME SHEET -- MULTI-CONTRACT

EMPLOYEE NAME: _____

EMPLOYEE ID: _____

Month: _____ Year: _____

	Date	Time In	Lunch Break	Time Out	Reg Hours Worked	Time In	Time Out	Hours Worked	Time In	Time Out	Hours Worked	Total Hours Worked
Sunday												
Monday												
Tuesday												
Wednesday												
Thursday												
Friday												
Saturday												
Total												

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Sunday												
Monday												
Tuesday												
Wednesday												
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Friday												
Saturday												
Total												

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Sunday												
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Wednesday												
Thursday												
Friday												
Saturday												
Total												

Office Use Only

**Employee Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

** The signature of the Employee on this time sheet certifies that his/her documentation of hours worked is a true and accurate statement of time worked.