

# LEXINGTON SCHOOLS

Pay period start date: 1/21/2026  
Pay period end date: 2/5/2026

Employee: \_\_\_\_\_

Any extra hours worked will  
be paid on the  
Feb 20, 2026 pay date

| Day       |           | Start | Stop | Total Regular | Start | Stop | Total Over Time |
|-----------|-----------|-------|------|---------------|-------|------|-----------------|
| Wednesday | 1/21/2026 |       |      |               |       |      |                 |
| Thursday  | 1/22/2026 |       |      |               |       |      |                 |
| Friday    | 1/23/2026 |       |      |               |       |      |                 |
| Saturday  | 1/24/2026 |       |      |               |       |      |                 |
| Sunday    | 1/25/2026 |       |      |               |       |      |                 |
| Monday    | 1/26/2026 |       |      |               |       |      |                 |
| Tuesday   | 1/27/2026 |       |      |               |       |      |                 |
| Wednesday | 1/28/2026 |       |      |               |       |      |                 |
| Thursday  | 1/29/2026 |       |      |               |       |      |                 |
| Friday    | 1/30/2026 |       |      |               |       |      |                 |
| Saturday  | 1/31/2026 |       |      |               |       |      |                 |
| Sunday    | 2/1/2026  |       |      |               |       |      |                 |
| Monday    | 2/2/2026  |       |      |               |       |      |                 |
| Tuesday   | 2/3/2026  |       |      |               |       |      |                 |
| Wednesday | 2/4/2026  |       |      |               |       |      |                 |
| Thursday  | 2/5/2026  |       |      |               |       |      |                 |

Employee signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor signature \_\_\_\_\_ Date \_\_\_\_\_

FOR TREASURER'S OFFICE USE ONLY

|                                 |                     |            |
|---------------------------------|---------------------|------------|
| Total Substitute hours _____    | at rate of \$ _____ | = \$ _____ |
| Total Straight-Time hours _____ | at rate of \$ _____ | = \$ _____ |
| Total Over-Time hours _____     | at rate of \$ _____ | = \$ _____ |