

<b><u>Treasurer's Office Use Only</u></b>	
Total Hours	_____
\$54/hr first hour of each day	_____
\$26/hr each remaining hour/day	_____
<b>Total Paid</b>	_____

# NURSE

## SERVICES RENDERED TIMESHEET

Pay period start date: 3/6/2026

Pay period end date: 3/20/2026

04/02/2026 pay date

Print Name: \_\_\_\_\_

Student's Name(s): \_\_\_\_\_

Day		Start Time	End Tme	Total Hours
Friday	3/6/2026			
Saturday	3/7/2026			
Sunday	3/8/2026			
Monday	3/9/2026			
Tuesday	3/10/2026			
Wednesday	3/11/2026			
Thursday	3/12/2026			
Friday	3/13/2026			
Saturday	3/14/2026			
Sunday	3/15/2026			
Monday	3/16/2026			
Tuesday	3/17/2026			
Wednesday	3/18/2026			
Thursday	3/19/2026			
Friday	3/20/2026			
		<b>Total Hours for Pay Period</b>		

\_\_\_\_\_  
Client Signature (Designee)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator signature

\_\_\_\_\_  
Date

**Approval must be obtained from the Building Principal prior to submission to the Treasurer's Office for payment.**