

**LUMBERTON TOWNSHIP BOARD OF EDUCATION  
2024-2025 TIMESHEET**

**NAME** \_\_\_\_\_ **DATE** \_\_\_\_\_

**SCHOOL** \_\_\_\_\_ **CLUB/ACTIVITY/STIPEND** \_\_\_\_\_

**RATE:** \_\_\_\_\_ **For school office use:**  
**ACCOUNT:** - - - - -

	DATE	IN	OUT	LUNCH	IN	OUT	TOTAL DAILY HOURS
SUN							
MON.							
TUES.							
WEDS.							
THURS.							
FRI.							
SAT.							
SUN.							
MON.							
TUES.							
WEDS.							
THURS.							
FRI.							
SAT.							

Employee's Signature \_\_\_\_\_ **TOTAL HOURS** \_\_\_\_\_

**SUPERVISOR'S SIGNATURE:** \_\_\_\_\_

**Timesheets will not be accepted in the Board Office without rate of pay or general fund account number.**

**The listed work must have Board of Education approval.**

**Please fill time sheet out COMPLETELY.**

Hourly wages are not paid for lunch hours.  
Please keep a copy of timesheets for your records.

**ALL TIME SHEETS MUST BE RECEIVED BY THE FRIDAY BEFORE PAYDAY.**