

FULLERTON SCHOOL DISTRICT CERTIFICATED EXTRA TIME SHEET

Employee Name

Date

4-Digit
Employee ID #
(Do not use Social
Security Number)

Location

Rate	Hours	Budget Number (must be listed)		
		-		
		-		
Date	From	To	Worked Hours	Type of Work (must be listed)
TOTAL HOURS:				

I hereby certify that the above report is a true and exact record of the hours performed for the Fullerton School District.

Employee's Signature Date

Supervisor's Signature Date

Distribution: Original to Payroll