Monthly Time Sheet

Green City R-1 Schools
301 North East Street
Green City MO 63545-9763

Employee Name:_____ Title:_____

Date	Start Time	End Time	Comments	Total Hours
TOTALS				

Employee Signature:_____ Date:_____

Supervisor's Signature:_____ Date:_____

Superintendent's Signature:_____ Date:_____

"Building Foundations for Successful Lives"