Use Yellow Paper

WEST BONNER COUNTY SCHOOL DISTRICT #83
221 Main St., Priest River, ID 83856

SUBSTITUTE TIMESHEET

Employee
Name_____School_____

Period Covered_____ To _____
Month Day Year *Month Day Year*

Dates(s)	Hours/ Days	Name of Person You Substituted For	School	Supervisor Approval	Depart Code	Sub Rate	Amount

_____
Substitute Signature

For Accounting Department Use Only

Certified **Classified**

Rate	Depart.	Days	Total			Rate	Depart	Hours	Total