

# PASSAIC VALLEY REGIONAL HIGH SCHOOL

100 EAST MAIN STREET, LITTLE FALLS, NEW JERSEY 07424



## Time Sheet

Employee Name (please print): \_\_\_\_\_

Department: \_\_\_\_\_

Period Ending \_\_\_\_\_

Date	Time on Duty	Time off Duty	Brief Description of Work	No. Hours Worked
Total:				

*I do solemnly declare and certify under the penalties of the law that the within time sheet is correct on all its particulars; that the services have been rendered as stated herein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with the above claim.*

Signature of Employee: \_\_\_\_\_

Signature of Immediate Supervisor: \_\_\_\_\_