

		CERTIFICATED HOME TEACHING TIMESHEET					
		EMPLOYEE NAME			ID #		
LIVERMORE SCHOOL DISTRICT					MONTH/YEAR		
					(separate timesheet per student)		
DE	ADLINES - Pei				ach due in the Payroll Office by 5:00 pm nex		
			<u> </u>		, , , ,	,	
	TIN 45 IN	TIME OUT	225	TOTAL	COMMENTS		
ATE 1	TIME IN	TIME OUT	PREP	HRS	(Please do not include any student names	or information)	
2							
3							
4 5 6							
7							
8 9							
LO							
11							
L2 L3							
14							
15							
16							
L7							
18							
L9							
20							
21							
22							
23							
24 25							
26							
27							
28							
29							
30							
31							
TOTAL HOURS FOR PERIOD							
Employee Signature Date			Date		Department/Site Signature (if applicable)	Date	
	, ., o .						
Business Services Signature Date					Account Code (FND-OBJT-RESC-GOAL-FUNC-LOC-MG-Y-COST)		
				PAYROLL (USE ONLY		
=					GRAND TOTAL		
					PAID		