

## McALLEN INDEPENDENT SCHOOL DISTRICT Monthly Payroll Time Report

Name: \_\_\_\_\_  
Last
First
M.I.
EIN

Pay Period Beginning \_\_\_\_\_ Ending \_\_\_\_\_ Campus \_\_\_\_\_

DATE	A.M.		P.M.		TOTAL	POSITION
	IN	OUT	IN	OUT		
	Saturday					
	Sunday					
	Monday					
	Tuesday					
	Wednesday					
	Thursday					
	Friday					

DATE	DAY	IN	OUT	WORKWEEK TOTAL		TOTAL	POSITION
				IN	OUT		
	Saturday						
	Sunday						
	Monday						
	Tuesday						
	Wednesday						
	Thursday						
	Friday						

DATE	DAY	IN	OUT	WORKWEEK TOTAL		TOTAL	POSITION
				IN	OUT		
	Saturday						
	Sunday						
	Monday						
	Tuesday						
	Wednesday						
	Thursday						
	Friday						

DATE	DAY	IN	OUT	WORKWEEK TOTAL		TOTAL	POSITION
				IN	OUT		
	Saturday						
	Sunday						
	Monday						
	Tuesday						
	Wednesday						
	Thursday						
	Friday						

DATE	DAY	IN	OUT	WORKWEEK TOTAL		TOTAL	POSITION
				IN	OUT		
	Saturday						
	Sunday						
	Monday						
	Tuesday						
	Wednesday						
	Thursday						
	Friday						

**WORKWEEK TOTAL** \_\_\_\_\_

NOTE: All Sec., Clerks and Aides Must Record Their Time Daily  
Time Report Should Be Sent to Payroll at End of Each Month

\_\_\_\_\_  
SIGNATURE OF EMPLOYEE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE AND TITLE OF ADM/SUPV

\_\_\_\_\_  
DATE