

OVERTIME TIMESHEET

DUVAL COUNTY SCHOOL BOARD
PAYROLL DEPARTMENT
1701 PRUDENTIAL DRIVE - 2ND FL
JACKSONVILLE, FLORIDA 32207

EMPLOYEE : _____ **PN** _____

THIS FORM IS TO BE USED BY ALL CIVIL SERVICE EMPLOYEES EXCEPT CUSTODIAL, FOOD SERVICE AND HOURLY. IF YOU ARE ON ANNUAL LEAVE {AL}, SICK LEAVE {SL}, LEAVE WITHOUT PAY {LWOP}, A LEGAL HOLIDAY, OR DO OVERTIME {OT}, PLEASE WRITE IN THE DESCRIPTION OF LEAVE.

DO NOT INCLUDE LUNCH TIME IN THE TOTAL NUMBER OF HOURS WORKED.

					TOTAL NO.	
DATE	TIME IN	TIME OUT	TIME IN	TIME OUT	HOURS PAID	EXPLANATION
			TOTAL HOURS/FIRST WEEK			
			TOTAL HOURS/SECOND WEEK			

EMPLOYEE SIGNATURE _____

DATE _____

SUPERVISOR SIGNATURE

DATE _____