

MARATHON CENTRAL SCHOOL

MISCELLANEOUS PAYROLL SHEET

FOR: SUBSTITUTE TEACHERS, SUBSTITUTE AIDES, CHAPERONES, TUTORING,
CO-CURRICULAR, SUBSTITUTE CLEANERS

NAME: _____

ADDRESS: _____

Fill in **one** of last 3 columns

DATES WORKED	ACTIVITY OR FOR WHOM WORKED	1/2 DAY?	FULL?	HOURS

SIGNATURE