

## EAST GUERNSEY TUTOR PAYROLL INVOICE

**TEACHER** \_\_\_\_\_

(Teacher must fill in student name & hrs/day below)

\_\_\_\_\_  
Supervisor's Approval

\_\_\_\_\_  
Date

### Tutor Payroll Codes

Ortho. K-6 - 001-1234-119	MH K-6 - 001-1231-119
Ortho. 7-12 - 001-1244-119	MH 7-12 - 001-1241-119
CD K-6 - 001-1236-119	ED K-6 - 001-1235-119
CD 7-12 - 001-1246-119	ED 7-12- 001-1245-119
Non Spec. Ed.-001-1100-119	SLD K-6 - 001-1237-119
	SLD 7-12- 001-1247-119

(Supervisor will insert the correct code for each student listed)

	Week of ____/____/____							Week of ____/____/____							
Student's Name	S	M	T	W	T	F	S	S	M	T	W	T	F	S	TOTAL
															hrs.
<b>Payroll Code:</b> _____														\$	
															hrs.
<b>Payroll Code:</b> _____														\$	
															hrs.
<b>Payroll Code:</b> _____														\$	
															hrs.
<b>Payroll Code:</b> _____														\$	
															hrs.
<b>Payroll Code:</b> _____														\$	

**Payroll Use ONLY:**

\$

**HOURLY RATE**

<i>Pay Account</i>	<i>#hrs</i>	<i>TOTAL</i>
		\$
		\$
		\$
<b>Invoice Grand Total</b>		<b>\$</b>

JOB # \_\_\_\_\_

Payroll Date \_\_\_\_\_

Superintendent approval \_\_\_\_\_