

**PERRY LOCAL SCHOOL DISTRICT  
HOURLY PAY REPORT**

NAME \_\_\_\_\_ SOCIAL SECURITY \_\_\_\_\_  
 SCHOOL \_\_\_\_\_ POSITION \_\_\_\_\_  
 PAY PERIOD FROM \_\_\_\_\_ TO \_\_\_\_\_

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	TOTAL

APPROVED \_\_\_\_\_  
 BUILDING PRINCIPAL/SUPERVISOR

\*\*\*\*\*

IF HOURS ARE TO BE PAID FROM FEDERAL/STATE/LOCAL GRANT:

ACCOUNT NUMBER: \_\_\_\_\_

GRANT ADMINISTRATOR APPROVAL \_\_\_\_\_