

# INDIVIDUAL HOURLY TIME REPORT

Payroll Department  
Lincoln Public Schools • Lincoln, Nebraska

Name: \_\_\_\_\_ Employee ID Number: \_\_\_\_\_

Job Code: \_\_\_\_\_ Rate: \$ \_\_\_\_\_ Account Number: \_\_\_\_\_

Date	School	Kind of Work	Service Began	Service Ended	Hours Worked

Note: Do not include lunch time in Hours Worked.

\_\_\_\_\_  
*Employee Signature*

\_\_\_\_\_  
*Principal or Supervisor*

Total Hours Worked: \_\_\_\_\_