## Canton Independent School District Time Sheet

Pay Period Ending								
Employ	vee Name					Social Security #		
Job Titl	e							
DATE	START TIME	LUNCH OUT	LUNCH IN	END TIME	REGULAR HOURS		O/T HOURS	
		Comp Hou	rs Brought I	Forward	Total Hours	Worked		
		Comp Hours Added Comp Hours Used			Employee Signature			
		Comp Hours Balance			Supervisor Signature			