

7/3/2026	0.50	16.5
0.50	0.50	6
0.50	0.50	5
0.50	0.50	27.5

EMP#	6/8/26	6/9/26	6/10/26	6/11/26	6/12/26	TOTAL	Pay of:
1286						0.00	0.00
1981						4.00	480.00
40						0.00	0.00
1984						0.00	0.00
1912						0.00	0.00
73						0.00	0.00
1966						0.00	0.00
1803						0.00	0.00
1960						0.00	0.00
1908						0.00	0.00
1115						0.00	0.00
1946						0.00	0.00
1947						0.00	0.00
1208						0.00	0.00
1802						0.00	0.00
1961						0.00	0.00
1952						0.00	0.00
1975						0.00	0.00
1109						0.00	0.00
1955						0.00	0.00
1978						0.00	0.00
1099						0.00	0.00
1883						0.00	0.00
1818						0.00	0.00
1954						0.00	0.00
504						0.00	0.00
1779						0.00	0.00
324						0.00	0.00
1907						0.00	0.00
333						0.00	0.00
1983						0.00	0.00
1853						0.00	0.00
1940						0.00	0.00
1913						0.00	0.00
970						0.00	0.00
1901						0.00	0.00
1828						0.00	0.00
						27.50	\$3,400.00

TG

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PAYROLL DATA FORM LAEC

TO: Payroll Clerk. Administration Building

page 1

The following is a correct report of the attendance of the employee(s) for the period:
beginning: 6/8/26 – 6/19/26

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	6/8/26 – 6/12/26	5	FMLA
	PM	6/8/26 – 6/12/26		
	AM	6/8/26	1	Bereavement
	PM	6/8/26		
	AM	6/8/26 – 6/12/26	2	Personal Day
	PM	6/8/26 – 6/12/26	3	Illness
	AM	6/8/26 – 6/12/26	5	FMLA
	PM	6/8/26 – 6/12/26		
	AM	6/8/26 – 6/12/26	5	Uncompensated
	PM	6/8/26 – 6/12/26		
	AM		½	Illness
	PM	6/9/26		
	AM	6/9/26	1	Personal Day
	PM	6/9/26		
	AM	6/9/26, 6/10/26	2	Uncompensated
	PM	9/9/26, 6/10/26		

RECORD OF SUBSTITUTES (Do not list hourly employees)				
Name of Substitute	Teacher Absent	Insert Dates and Times (.)		Total Days
		AM	6/8/26 – 6/12/26	5 ✓
		PM	6/8/26 – 6/12/26	
		AM	6/8/26	1 ✓
		PM	6/8/26	
		AM	6/8/26 – 6/12/26	5 ✓
		PM	6/8/26 – 6/12/26	
		AM	6/9/26, 6/10/26, 6/11/26	3 ✓
		PM	6/9/26, 6/10/26, 6/11/26	
		AM		½ ✓
		PM	6/9/26	
		AM		
		PM		
		AM		
		PM		

(*) Should a substitute tea

departure under AM or PM.

SIGNATURE OF PRINC

6/19/26

11650

Beginning: 6/8/26 – 6/19/26

Name		Insert Dates		Total Days	Reason
		AM	6/10/26	1	Illness
		PM	6/9/26		
		AM	6/10/26	1	School Business
		PM	6/10/26		
		AM	6/10/26	1	School Business
		PM	6/10/26		
		AM	6/10/26	1	School Business
		PM	6/10/26		
		AM	6/10/26	1	School Business
		PM	6/10/26		
		AM	6/10/26	1	School Business
		PM	6/10/26		
		AM	6/10/26	1	School Business
		PM	6/10/26		
	AM		½	Illness	
	PM	6/10/26			

[illegible]

(*) Should a substitute teacher [REDACTED] under AM or PM.

SIGNATURE OF PRINCIPAL _____

6/19/24

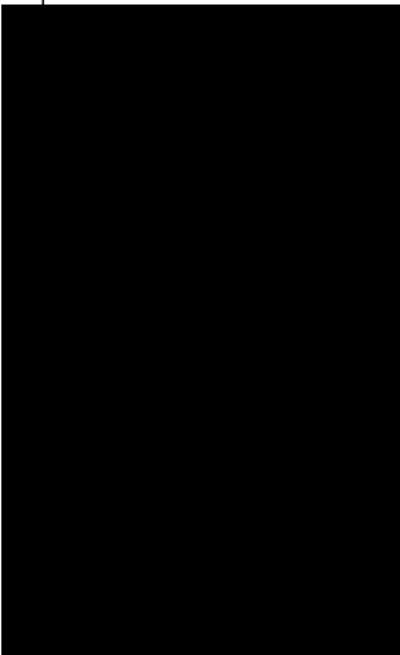
**PAYROLL DATA FORM
LAEC**

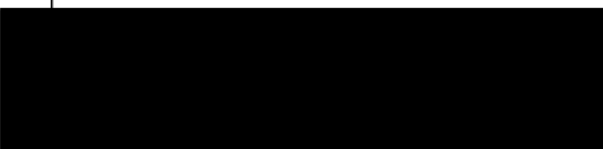
TO: Payroll Clerk, Administration Building

page 3

The following is a correct report of the attendance of the employee(s) for the period:

beginning: 6/8/6 – 6/12/26

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	6/10/26, 6/11/26, 6/12/26	3	
	PM	6/10/26, 6/11/26, 6/12/26		
	AM		½	Illness
	PM	6/11/26		
	AM	6/11/26	1	Illness
	PM	6/11/26		
	AM	6/11/26	1	
	PM	6/11/26		
	AM	6/12/26	1	Personal Day
	PM	6/12/26		
	AM	6/12/26	1	Personal Day
	PM	6/12/26		
	AM	6/12/26	1	Personal Day
	PM	6/12/26		
	AM	6/12/26	1	Illness
	PM	6/12/26		

RECORD OF SUBSTITUTES (Do not list hourly employees)				
Name of Substitute	Teacher Absent	Insert Dates and Times (.)		Total Days
		AM	6/11/26	1
		PM	6/11/26	
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		

(*) Should a substitute be used, please indicate the date and time (AM or PM) under AM or PM.

SIGNATURE OF PR



6/19/26

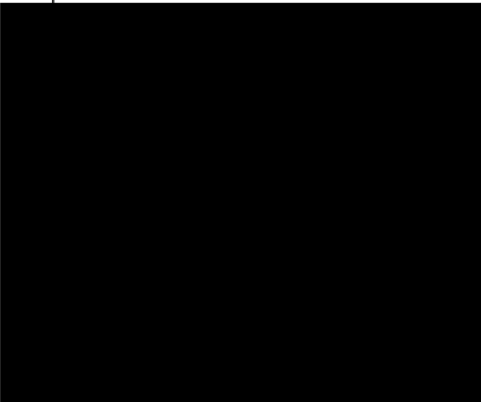
**PAYROLL DATA FORM
LAEC**

TO: Payroll Clerk, Administration Building

page 4

The following is a correct report of the attendance of the employee(s) for the period:

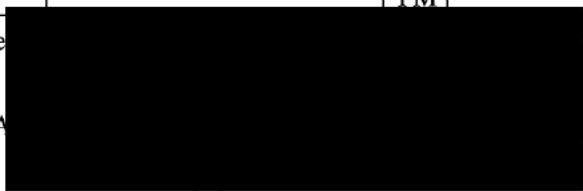
Beginning: 6/8/6 – 6/19/26

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM		½	Illness
	PM	6/12/26		
	AM	6/12/26	1	Illness
	PM	6/12/26		
	AM	6/15/26	1	Vacation
	PM	6/15/26		
	AM	6/15/26	1	Vacation
	PM	6/15/26		
	AM			
	PM			
	AM			
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	AM			
	PM			
	AM			
	PM			

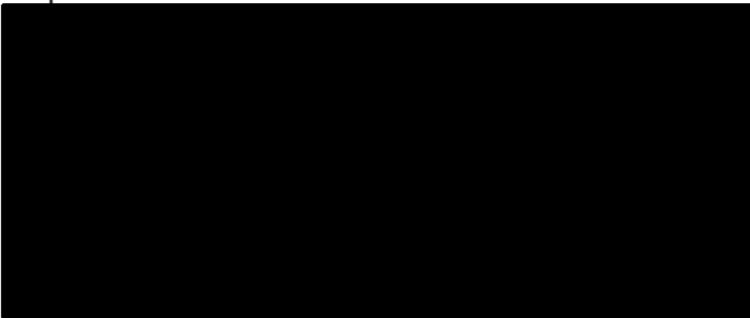
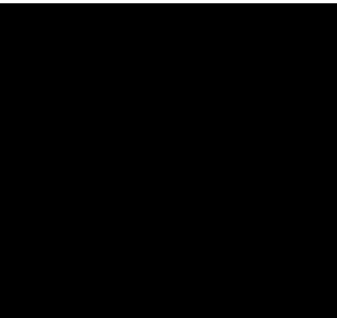
RECORD OF SUBSTITUTES (Do not list hourly employees)			
Name of Substitute	Teacher Absent	Insert Dates and Times (.)	Total Days
		AM	
		PM	
		AM	
		PM	
		AM	
		PM	
		AM	
		PM	
		AM	
		PM	
		AM	
		PM	

(*) Should a substitute teacher be used, indicate departure under AM or PM.

SIGNATURE OF PRINCIPAL

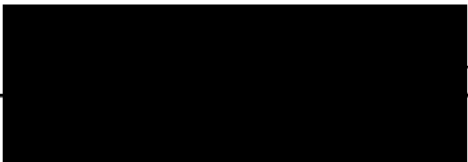


6/19/26

RECORD OF SUBSTITUTES		(Do not list hourly employees)	
Name of Substitute	Teacher Absent	Insert Dates and Times (.)	Total Days
		AM 6/8, 6/9, 6/11, 6/12	4
		PM 6/8, 6/9, 6/11, 6/12	
		AM 6/8, 6/10	2
		PM 6/8, 6/10	
		AM	
		PM	
		AM	
		PM	
		AM	
		PM	
		AM	
		PM	
		AM	
		PM	

(*) Should a substitute teacher work less than a full day, insert time of arrival or departure under AM or PM.

SIGNATURE OF PRINCIPAL/PRINCIPAL'S SECRETARY: _____




PAYROLL DATA FORM - LEHIGHTON AREA MIDDLE SCHOOL

PAGE 1 OF 3

TO: Payroll Clerk. Administration Building

The following is a correct report of the attendance of the employee(s) for the period:
beginning: Monday, June 8, 2026 and ending Friday, June 19, 2026

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	6/8-6/12, 6/15	6	Unpaid/Parental Leave
	PM	6/8-6/12, 6/15		
	AM	6/8, 6/9	2	School Business (1) Personal (1)
	PM	6/8, 6/9		
	AM	6/8	1	School Business
	PM	6/8		
	AM	6/8, 6/9	1-1/2	Personal (1/2) School Business (1)
	PM	6/9		
	AM	6/8	1	School Business
	PM	6/8		
	AM	6/8	1	School Business
	PM	6/8		
	AM	6/8	1	School Business
	PM	6/8		
	AM	6/8	1/2	School Business
	PM			
	AM	6/8	1/2	School Business
	PM			
	AM	6/8	1	School Business
	PM	6/8		
	AM	6/9	1	School Business
	PM	6/9		
	AM	6/9	1	School Business
	PM	6/9		
	AM	6/9	1	School Business
	PM	6/9		
	AM	6/9	1	School Business
	PM	6/9		
	AM	6/9	1	School Business
	PM	6/9		
	AM	6/9	1	Illness
	PM	6/9		
	AM	6/9, 6/12	2	Illness
	PM	6/9, 6/12		
	AM	6/12	1-1/2	Illness
	PM	6/10, 6/12		
	AM	6/10	1	Illness
	PM	6/10		
	AM	6/11	1	Illness
	PM	6/11		

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	6/11	1/2	Illness
	PM			
	AM		1/2	Illness
	PM	6/12		
	AM	6/12	1	Illness
	PM	6/12		
	AM	6/19	1-1/2	Vacation
	PM	6/15, 6/19		
	AM	6/15	1	Personal
	PM	6/15		
	AM	6/19	1	Vacation
	PM	6/19		
	AM	6/19	1	Vacation
	PM	6/19		
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6/26/2026

EMP#	LAST	FIRST	6/8/26	6/9/26	6/10/26	6/11/26	6/12/26	6/15/26	6/16/26	6/17/26	6/18/26	6/19/26	TOTAL	Pay of:
1286													0.00	0.00
40													0.00	0.00
1912													0.00	0.00
1898													0.00	0.00
1862													0.00	0.00
73													0.00	0.00
1803													0.00	0.00
1960													0.00	0.00
TG													0.00	0.00
1908													0.00	0.00
1159													0.00	0.00
1946													0.00	0.00
TG													0.00	0.00
1802													0.00	0.00
1961													0.00	0.00
1109													0.00	0.00
1955													0.00	0.00
1900													0.00	0.00
1099													0.00	0.00
1883													0.00	0.00
1818													0.00	0.00
1895													0.00	0.00
1892													0.00	0.00
504													0.00	0.00
1779													0.00	0.00
1907													0.00	0.00
333													0.00	0.00
1853													0.00	0.00
970													0.00	0.00
1901													0.00	0.00
			0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	5.00	650.00
													5.00	\$650.00

HIGH SCHOOL PAYROLL DATA FORM

Emp #	06/08/26	06/09/26	06/10/26	06/11/26	06/12/26	06/15/26	06/16/26	06/17/26	06/18/26	06/19/26
909				S	S					
1699				V	V					
510										
612										
1363										
45					S					
694										
775										
1869			1/2 S							
1710										
1374										
1794										
1854										
418										
1030										
581										
1249										
1553										
691										
847										
624										
1431										V
1739							1/2 S			
553			1/2 S							
1368										
1439										
1434	1/2 S	1/2 S	1/2 S	1/2 S		1/2 S				
526		1/2 S								
1801										
438										
1850										
501										
893										
1808			1/2 S							
1081	MCCARROLL	JESSICA								

HIGH SCHOOL PAYROLL DATA FORM

[illegible]

A

School Business

Uncompensated Day

EFMLA-COVID

 Σ

U

U

Sick

Personal

Jury Duty

Bereavement

5

2

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