

LUNCH TIME AIDES

LTA

Emp #
1607
440
1692
1613
1863
1945
1859

HS
HS TE
EC TG
EC TG
MS TG
HS
MS TG

Week 1 Week 2

B	RATE	Week 1	Week 2	Total
80	12.52	12.00	12.00	24.00
20	12.52	14.00	13.00	27.00
20	12.52	16.75	16.25	33.00
20	12.52	16.25	12.00	28.25
50	12.52	8.25	8.75	17.00
80	12.52	14.00	15.00	29.00
50	12.52	12.00	12.00	24.00

Pay of: 9/25/2026

\$300.48
\$338.04
\$413.16
\$353.69
\$212.84
\$363.08
\$300.48

182.25 \$2,281.77

3 No PSERS

EMPLOYEE TIME SHEET

LEHIGHTON AREA SCHOOL DISTRICT
Lehighton, Pennsylvania

This report is to be completed by employee and submitted by immediate supervisor to the Business Office for each two-week pay period.
Reports submitted the Monday following each pay day will be paid the following payday.

DATE	TIME		TIME OUT FOR LUNCH	NUMBER OF HOURS	BUILDING	POSITION
	FROM	TO				
8-31-26	0930	1230		3	H.S.	lunchaid / hall monitor
9-1	1000	100		3		
9-2	0930	1230		3		
9-3	1000	100		3		
			Week 1 Total	12		
9-8	0930	1230		3		
9-9	0930	1230		3		
9-10	0930	1230		3		
9-11	0920	1220		3		
~~9-12~~	~~0930~~	~~1230~~		~~3~~	Saturday	Nowork
			Week 2 Total	~~12~~ 12		
TOTAL HOURS				24		

Print Employee Name

Employee Signature

Certification of Hours

Approved for Payment:

Superintendent or Business Administrator

Date:

Date:

Date:

EMPLOYEE TIME SHEET

LEHIGHTON AREA SCHOOL DISTRICT
Lehigh, Pennsylvania

This report is to be completed by employee and submitted by immediate supervisor to the Business Office for each two-week pay period.
Reports submitted the Monday following each pay day will be paid the following payday.

DATE	TIME		TIME OUT FOR LUNCH	NUMBER OF HOURS	BUILDING	POSITION
	FROM	TO				
8-31	815	1215		4		
9-1	1045	145		3		
9-2	815	1245		4		
9-3	1045	145		3		
			Week 1 Total	14		
9-8	1045	145		3		
9-9	815	1215		4		
9-10	1045	145		3		
9-11	1045	145		3		
			Week 2 Total	13		
TOTAL HOURS				27		

Print Employee Name

Employee Signature

Certification of

Approved for Payment: _____

Date: 9-11-26

Date: 9-11-26

Date: _____

EMPLOYEE TIME SHEET

LEHIGHTON AREA SCHOOL DISTRICT Lehighton, Pennsylvania

This report is to be completed by employee and submitted by immediate supervisor to the Business Office for each two-week pay period.
Reports submitted the Monday following each pay day will be paid the following payday.

DATE	TIME		TIME OUT FOR LUNCH	NUMBER OF HOURS	BUILDING	POSITION
	FROM	TO				
8/31/26	10:00	2:00		4	LEC	Lunch Aide
9/1/26	10:00	2:30		4.50	"	" " wrote a report for Dr. McGrath
9/2/26	10:00	2:00		4	"	Lunch Aide
9/3/26	10:00	2:05		4.25	"	" " short on lunch aide
9/4/26	off					
			Week 1 Total	16.75		
9/7/26	off					
9/8/26	10:00	2:00		4	LEC	Lunch Aide
9/9/26	10:00	2:00		4	"	" "
9/10/26	10:00	2:00		4	"	" "
9/11/26	10:00	2:05		4.25	"	" " short on lunch aide
			Week 2 Total	16.25		
TOTAL HOURS				33.00		

Print Employee Name

Employee Signature

Approved for Payment

Date: 9/11/26

Date: 9/14/26

EMPLOYEE TIME SHEET

LEHIGHTON AREA SCHOOL DISTRICT Lehighton, Pennsylvania

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DATE	TIME		TIME OUT FOR LUNCH	NUMBER OF HOURS	BUILDING	POSITION
	FROM	TO				
8-31-26	10:00	2:00		4	LEC	Lunch Aide
9-1-26	10:00	2:00		4		
9-2-26	10:00	2:00		4		
9-3-26	10:00	2:00		4.25		No Help only 2 Aides end of Day
9-4-26	—	—	—	—		
			Week 1 Total	16.25		
9-7-26						
9-8-26	10:00	2:00		4		
9-9-26	10:00	2:00		4		
9-10-26	10:00	2:00		4		
9-11-26	—	—	—	—		Called off-sick
			Week 2 Total	12		
TOTAL HOURS				28.25		

Print Employee Name _____

Employee Signature _____

Certification of Hours _____

Date: 9-11-2026

Date: 9/14/26

Approved for Payment: _____

Superintendent or Business Administrator

Date: _____

EMPLOYEE TIME SHEET

LEHIGHTON AREA SCHOOL DISTRICT
Lehigh, Pennsylvania

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DATE	TIME		TIME OUT FOR LUNCH	NUMBER OF HOURS	BUILDING	POSITION
	FROM	TO				
8/31	10:30	1:30		3	MS	Lunch aide
9/1	10:45	1:15		2.5	MS	lunch
9/3	10:30	1:15		2.75	MS	lunch
9/9	10:30	1:15		2.75	MS	lunch
9/10	10:30	1:30		3	MS	lunch
9/11	10:30	1:30		3	m	lunch
		Week #1	total	8 1/4		
		Week #2	total	8 3/4		
TOTAL HOURS				17		

Print Employee

Employee Sig

Certification of

Approved for Payment:

Superintendent or Business Administrator

Date:

Date:

Date:

9/11/26

9/14/26

EMPLOYEE TIME SHEET

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Lehigh, Pennsylvania

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DATE	TIME		TIME OUT FOR LUNCH	NUMBER OF HOURS	BUILDING	POSITION
	FROM	TO				
8/31/26	10:45	1:45	—	3	HS	Lunch Aid/Hall Monitor
9/1/26	8:15	12:15		4		
9/2/26	10:45	1:45		3		
9/3/26	8:15	12:15		4		
9/4/26						
			Week 1 Total	14		
9/8/26	8:15	12:15		4		
9/9/26	10:45	1:45		3		
9/10/26	8:15	12:15		4		
9/11/26	8:15	12:15		4		
			Week 2 Total	15		
			TOTAL HOURS	29		

Print Employee Name

Employee Signature

Certification of Hours

Approved for Payment:

Date: 9/11/26

Date: 9/14/26

Date:

Superintendent or Business Administrator

EMPLOYEE TIME SHEET

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Lehighton, Pennsylvania

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DATE	TIME		TIME OUT FOR LUNCH	NUMBER OF HOURS	BUILDING	POSITION
	FROM	TO				
9/31	10:30	1:30	-	3	MS	Lunch Aide
10/1	10:30	1:30	-	3	↓	↓
10/2	10:30	1:30	-	3	↓	↓
10/3	10:30	1:30	-	3	↓	↓
			Week 1 Total	12		
10/8	10:30	1:30	-	3	MS	Lunch Aide
10/9	10:30	1:30	-	3	↓	↓
10/10	10:30	1:30	-	3	↓	↓
10/11	10:30	1:30	-	3	↓	↓
			Week 2 Total	12		
			TOTAL HOURS	24		

Print Employee Name

Employee Signature

Certification of Hours

Approved for Payment:

Superintendent or Business Administrator

Date:

Date:

Date:

9/11/20

9/15/20