Lincoln County School District

P.O. Box 118 Panaca NV 89042

Bus Driver Time Sheet

*Please fill out completely and submit to the district office immediately after the last day of the month.

Name:_____ Address:_____ Occupation:_____

Date	Job	# Hours Worked	Down Time # Hours	Travel Event	Travel Location
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I Certify that this time sheet is correct and that services were rendered as stated.				Employee Signature:	
Total Hours Worked ⇨				Supervisor Signature:	

For District Office use only.

Route _____X_____=_____

Trip _____X_____=_____

Down Time _____X_____=_____

TOTAL:

District Signature:_____