

**MONTGOMERY COUNTY PUBLIC SCHOOLS**

**PACS TIMESHEET**  
**Lunch/Recess Coverage**  
**(SEIU Only)**

Employee and Retiree Service Center  
MONTGOMERY COUNTY PUBLIC SCHOOLS  
Rockville, Maryland 20850

**EMPLOYEE INFORMATION**

Employee ID# \_\_\_\_\_ Name (please print) \_\_\_\_\_  
School Number \_\_\_\_\_ School Name \_\_\_\_\_  
Biweekly Pay Period \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

**INSTRUCTIONS**

1. Complete this form either digitally or in ink.
2. Use a separate form for each biweekly pay period.
3. Total hours reported for SEIU Classroom Coverage (Form 430-10S) and SEIU Lunch/Recess Coverage (this form) cannot exceed 7 hours per day.
4. Sign this timesheet in ink or with a digital signature (not typed) and submit it to the principal or timekeeper.
5. This form should be maintained with the school's payroll records.

**Get paid on time!**

**DO NOT HOLD TIMESHEETS OR REPORT HOURS PAST THE SCHEDULED PAY PERIOD DATES.  
THIS COULD RESULT IN A DELAY OF PAY.**

**LUNCH/RECESS COVERAGE (SEIU ONLY). REPORT WHOLE HOURS.**

	WEEK 1					WEEK 2					BIWEEKLY TOTAL
	MON	TUE	WED	THU	FRI	MON	TUE	WED	THU	FRI	
Hours											

**CERTIFICATION AND APPROVAL**

This is to certify that my regular duties do not require me to provide lunch and/or recess coverage; my record of lunch/recess coverage, as shown above, is correct; and payment has not been received for any of the above hours.

Employee Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

This is to certify that I have examined the above report and found it to be correct. It has been completed in accordance with policies and procedures and is approved.

Approved

Signature, Principal/Principal Designee \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_