## SUBSTITUTE TIME CLAIMS ARE DUE IN THE DISTRICT OFFICE ON THE 25TH CONTRACTED EMPLOYEES' TIME CLAIMS ARE DUE ON THE LAST WORKING DAY OF THE MONTH

CALAVERAS UNIFIED SCHOOL DISTRICT P. O. BOX 788 SAN ANDREAS, CA 95249

## EXTRA DUTY STIPEND TIME CLAIM

Enter below the activity for which an extra duty stipend is being claimed and the number of hours over and above the regular work day devoted to one of the activities outlined in district policy #4143. Payment for these activities will be reimbursed in accordance with the CUEA stipend schedule.

| DATE           | ACTIVITY      |      |      |                       | SITE | TIME IN                 | TIME OUT | TIME IN  | TIME OUT | TOTAL<br>HOURS |  |
|----------------|---------------|------|------|-----------------------|------|-------------------------|----------|----------|----------|----------------|--|
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
| STRS1 Schedule |               |      |      |                       |      | FICA2                   |          | Schedule |          |                |  |
|                | STR1RF Assign |      |      |                       |      | FICM2 Assign            |          |          |          |                |  |
|                | FICA1 Range   |      |      |                       |      | 32WC2 Range             |          |          |          |                |  |
| FICM1 Step     |               |      |      |                       |      | SUI2 Step               |          |          |          |                |  |
| 32WC1          |               |      |      |                       |      |                         |          |          |          |                |  |
| SUI1           |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
| Approva        | l of School A | ator | Date | Printed Employee Name |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
| Employee ID#   |               |      |      |                       |      | Employee Signature Date |          |          |          |                |  |
|                |               |      |      |                       |      |                         | Ū        |          |          |                |  |
| FUND           | RES           | ΡΥ   | GOAL | FUNC                  | OBJ  | SITE                    | MGR      | HOURS    | RATE     | TOTAL          |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          |          |                |  |
|                |               |      |      |                       |      |                         |          |          | TOTAL:   |                |  |

All extra duty time worked by either a certificated or classified employee, in addition to their contracted time, shall be logged on a **WHITE Extra Duty Stipend Time Claim**.

Activities which are paid at this rate include, gate, scoring, concession booth work at athletic events and officiating, as well as chaperoning duties. (See CUEA Article X, Section D)

Time claims must be filled out as follows:

- 1.) Date of Service.
- 2,) Identify the type of work/activity performed.
- 3.) Location of the site where you performed the work/activity.
- 4.) Record what time the extra duty began and when it ended.
- 5.) Record the total number of extra hours worked.
- 6.) The employee must print their name, sign and date the claim and write their employee ID# and work site.
- 7.) Your time sheet must be signed and dated by the secretary and the school site administrator at the school where you worked. The pay claim must be in to the district office Payroll Department by the 25th of the month if the employee is a substitute, and no later than the last working day of the month if the employee is contracted with the District. It is the responsibility of the employee to ensure that their time claims are received by the Payroll Department.