FD-116
Oct. 30, 2006

WARREN COUNTY SCHOOLS
ACTIVITY BUS DRIVER'S TIME SHEET

Name: _____ Period Covered: _____

Date	Driving Time To			Wait Time			Return Driving Time			Odometer Reading		Event and Location	Signature of Adult Chaperon and/or Supervisor Verifying Time	Pay Code
	Start Time	Stop Time	Total To Time	Start Time	Stop Time	Total Wait Time	Start Time	Stop Time	Total Return Time	Depart	Return			
Grand Total														

Falsifying information is grounds for dismissal.

I hereby certify that the above report of time is correct anc includes only hours worked each day

_____ _____
Employee Signature Date

I hereby certify that I have examined this report and to my knowledge it is a correct statement.

_____ _____
Supv. Signature Date