

PRINCIPAL'S MONTHLY PAYROLL REPORT

(See instructions on page v)

This report must be filed with the County Superintendent promptly at the end of each calendar month.

School Pine Crest { White (✓) For 1 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12 months
 { Negro ()

Beginning August 15, 1955

No. of Days School in Session During Month 20 and Ending September 12, 1955

No. of Regular Teachers: Elem. 10 Jr. H. S. _____ Sr. H. S. _____ Four-Year H. S. _____ Total 10

List personnel alphabetically in following order: (1) Principal; (2) Regular Teachers—a. Elementary, b. High School; (3) Professional Assistants—a. Elementary, b. High School; (4) Substitute Teachers*—a. Elementary, b. High School; (5) Secretarial help;** (6) Janitors; ** etc.; (7) School Lunch Workers ** ***

NAME List alphabetically by grades as directed	Grades Taught or Positions (1)	Days On Duty (2)	School Holidays (3)	Days Absent			Total (Columns 2-5 incl.) (6)	To be completed by County Superintendent				
				Sick Leave (4)	Other Reasons (5)	Monthly Contract (7)		DEDUCTIONS				Amount Due (12)
								Teacher Retirement (8)	Withholding (9)	Insurance (10)	Other (11)	
1. Reynolds, Margaret	Prin.	20				20						
2.												
3. Barnes, Mary T.	4th	20				20						
4. Bennett, Eleanor	3rd	20				20						
5. Bryan, Margaret	2nd	20				20						
6. Campbell, Lucille	6th	20				20						
7. Carnes, Rosine	2nd	20				20						
8. Daniels, Polly	1st	19			1	20						
9. Echols, Ann F.	1st	20				20						
10. Lavender, Wm W.	6th	15				15		Resigned Sept. 6, 1955				
11. Manos, Inez	6th	6				6		Employed Sept. 5, 1955				
12. Paul, Marguerite	4th	14				14		Late arrival from New Kensington, Pa.				
13. Walter, Mary	3rd	20				20						
14.												
15.												
16. Vance, June	Secty	20				20						
17.												
18.												
19. Weeks, S. G.	Janitor	20				20						
20.												
21.												
22.												
23.												
24.												
25.												
26.												
27.												
28.												
29.												
30.												

* Indicate, by code, teacher for whom substitute served.

** If paid by scholastic month, include here, omitting column "Grades Taught" and using next column as "Days on Duty."

*** If paid locally, the principal completes columns 7, 8, 9, 10, 11, & 12. Use col. 12 for "Amount Paid."

I hereby certify to the following: (1) All teachers in this school, including myself, have complied with the law and with regulations of the State Board of Education as set forth in the **Teacher's Register of Attendance**; (2) All teachers have kept the prescribed records and filed their monthly reports; (3) This report has been prepared as directed and is complete and correct to the best of my knowledge and belief.

Date Sept. 13, 1955

Signed: Margaret K. Reynolds
Principal

Date _____

Approved: _____
County Superintendent

