PRINCIPAL'S MONTHLY PAYROLL REPORT

			(See	instruc	ctions	on pag	ge v)							
This report must be filed with the Co							nd of each	calendar m	onth.					
School Sanford &	ram	ano	ec IV	Vhite T	×	For (1 2, 3, 4,	5, 6, 7, 8,	9, 10, 11,	12 mor	nths)			
ited by Causty 5 Unitendent	to compt		(N	legro ()	Pogis								
		-	100					ug /			and Industral	, 195		
No. of Days School in Session Durin	g Month_	a	2			and	Ending	sept		2	actific and	, 195_3		
No. of Regular Teachers: Elem. /	2 Jr. H.	S		Sr. H.	. S	(2)	Four-Year	H. S	Tota	1_/	2			
List personnel alphabetically in fessional Assistants—a. Elementary,	following	orde	r: (1) Prin	cinal:	(2) R	egular Tea	chers-a. H	Elementa	rv. b. H	igh Scho	ol; (3) Pro-		
help; ** (6) Janitors; ** etc.; (7) Scho	ol Lunch	Work	ers ••	•••	Stitute	: Ica	ners —a.	Elementar	y, U. 11	ign Sch	001, (0)	Secretaria		
	Grades		-	Days Absen		· sc	To be completed by County Superintendent							
NAME	Taught	Duty	School	9	Other	Total (Columns 2-5 incl.)	Monthly	Teacher	DI	EDUCTIO	NS	Amount		
List alphabetically by grades as directed	or Positions	Day	Scholi	Sick	Othe	Cool	Contract	Thetime	With- holding	Insur- ance	Other	Due		
as directed	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)		
1. HECKENBACH	1	20	0	C	0	20								
2. ANSLEY, M.	20	20	0	0	0	20								
3. BALL, C.	2 a	20	0	0	0	20	/							
4. BILLHIMER, D.	20	19	0	1	0	20	-							
5. BRINSON, R	29	20	0	0	0	_								
6. GRANT, A.	24	20	0	0	0	20								
7. GRANTHAM, E 8. JONES, R.	2 9	20	0	0	0	20								
9. RATHEF, A	2 4	19	0	1	0	20								
10. RICHARDS, R.	20	19	0	1	0	20								
11. RISER, J.	2 a	20		0	0	20								
12. ROUTH, S.	2 a	19%	0	1/2		20						- 02		
13. WRIGHT, M	2 a	20	0	0	0	20						13		
14. Durrow, E	2 4	20	00	0	0	20								
15. BROADHEAD, J. E.	200	-				100								
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* Indicate, by code, teacher for who **If paid by scholastic month, inc **If paid locally, the principal control of the State Board of Education records and filed their monthly report knowledge and belief. Date Application 13, 19	clude here ompletes g: (1) All n as set for ets; (3) Thi	colum teach	ns 7, ers in	8, 9, this	10, 11 school er's R	l, & 1:	2. Use co	l. 12 for "A lf, have con lance: (2) A	Amount I mplied w	Paid."	aw and w	with regula-		
								I	Principal			77.		
Date						A	pproved:					.87		
Dave							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	County	Superint	endent		-		

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Form FA-1P

PRINCIPAL'S MONTHLY PAYROLL REPORT—(Continued)

(See instructions on page v)

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THE STATE OF THE S	Grades		-	Days /	Absent	10	To be completed by County Superintendent						
NAME	Grades	Days On Duty	School	S Box		Total (Columns 2-5 incl.)	DEDUCTIONS						
	or Positions	ays n I	cho	Sick	Other	otal Colu	Monthly Contract	Teacher Retire-	With-	Insur-	Other	Amount	
List alphabetically by grades as directed	-							ment	holding	ance	School	to, or mays	
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Superintendent	County												