



# ADDITIONAL PAY FORM

<b>TO:</b>	PLYMOUTH PUBLIC SCHOOLS ADMINISTRATION BUILDING	<b>ATTENTION:</b> <b>PAYROLL DEPARTMENT</b>
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<b>FROM:</b>	
<b>SCHOOL:</b>	
<b>DATE:</b>	

<b>Date of Activity:</b>	
<b>Activity:</b>	

Name of Individual(s)	Additional Hours Worked	Rate	Amount

<b>ORG. #</b>	
<b>OBJ. #</b>	
<b>Project #</b>	
<b>Approved By:</b>	
<b>Date:</b>	

<b>COPY TO PAYROLL ON (DATE):</b>	
	<b>JOANNE (SECONDARY)</b>
	<b>LAURA (ELEMENTARY)</b>