

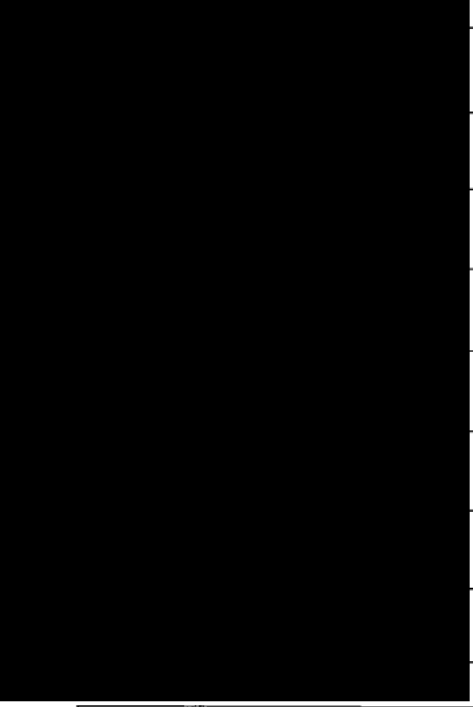
EMP	5/11/26	5/12/26	5/13/26	5/14/26	5/15/26	5/18/26	5/19/26	5/20/26	5/21/26	5/22/26	TOTAL	Pay of:
128											0.00	0.00
198	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	10.00	1,200.00
40											0.00	0.00
198											0.00	0.00
191											0.00	0.00
73	0.50	0.50	0.50	0.50	0.50						4.00	520.00
196											0.00	0.00
180											0.00	0.00
196	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	9.50	1,140.00
190											0.00	0.00
115		0.50	0.50								1.00	130.00
194											0.00	0.00
194											0.00	0.00
120											0.00	0.00
180											0.00	0.00
196	0.50	0.50	0.50	0.50	0.50	0.50	0.50				6.00	720.00
195											0.00	0.00
197											0.00	0.00
110											0.00	0.00
195											0.00	0.00
197			0.50	0.50							1.00	110.00
109					0.50	0.50					1.00	120.00
188											0.00	0.00
181	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	8.00	960.00
195						0.50	0.50	0.50	0.50	0.50	1.00	110.00
504	0.50	0.50				0.50	0.50	0.50	0.50	0.50	6.00	780.00
177											0.00	0.00
324		0.50	0.50		0.50	0.50					2.00	260.00
190							0.50	0.50	0.50	0.50	3.00	360.00
333				0.50	0.50						0.00	0.00
	0.50	0.50							0.50	0.50	3.00	330.00
185											0.00	0.00
194	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	8.00	960.00
191											0.00	0.00
970											0.00	0.00
190	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	10.00	1,300.00
182											0.00	0.00
											73.50	\$9,000.00

**PAYROLL DATA FORM
LAEC**

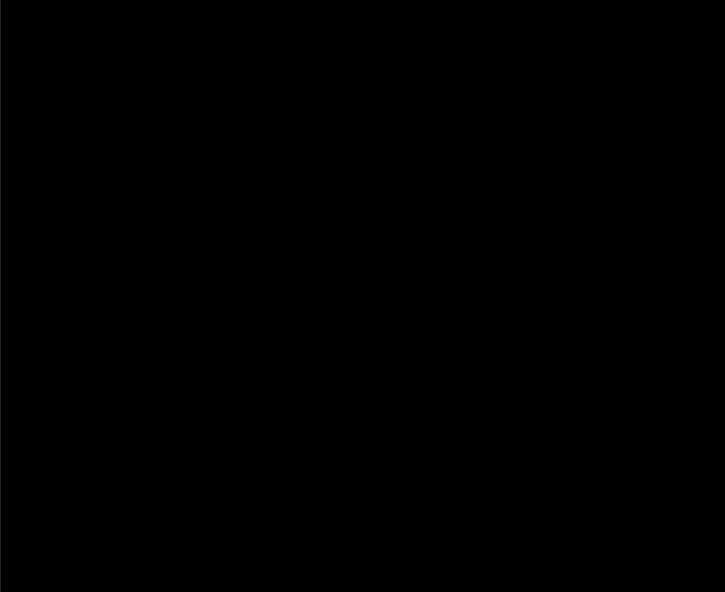
TO: Payroll Clerk, Administration Building

page 1

The following is a correct report of the attendance of the employee(s) for the period:
beginning: 5/11/26 – 5/22/26

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	5/11/26 – 5/22/26	10	FMLA
	PM	5/11/26 – 5/22/26		
	AM	5/11/26	1	Personal Day
	PM	5/11/26		
	AM	5/11/26 – 5/15/26	5	Personal Day
	PM	5/11/26 – 5/15/26		
	AM	5/11/26, 5/12/26, 5/22/26	1	Personal Day
	PM	5/11/26, 5/12/26, 5/22/26	1	Illness
	AM	5/11/26	1	Illness
	PM	5/11/26		
	AM	5/11/26	½	Illness
	PM			
	AM	5/11/26, 5/12/26	½	Illness
	PM	5/12/26	1	School Business
	AM	5/11/26, 5/14/26	2	Bereavement
	PM	5/11/26, 5/14/26		

RECORD OF SUBSTITUTES (Do not list hourly employees)

Name of Substitute	Teacher Absent	Insert Dates and Times (.)	Total Days
		AM 5/11, 5/12, 5/14, 5/15, 5/18, 5/19, 5/21, 5/22	8 ✓
		PM 5/11, 5/12, 5/14, 5/15, 5/18, 5/19, 5/21, 5/22	
		AM 5/11/26	1 ✓
		PM 5/11/26	
		AM 5/11/26, 5/12/26	2 ✓
		PM 5/11/26, 5/12/26	
		AM 5/11/26	1 ✓
		PM 5/11/26	
		AM 5/11/26	1 ✓
		PM 5/11/26	
		AM 5/13/26	1 ✓
		PM 5/13/26	
		AM 5/14/26	1 ✓
		PM 5/14/26	

(*) Should a substitute teacher work more than one day, list the days and times under AM or PM.

SIGNATURE OF PRINCIPAL

5/26/26

4350

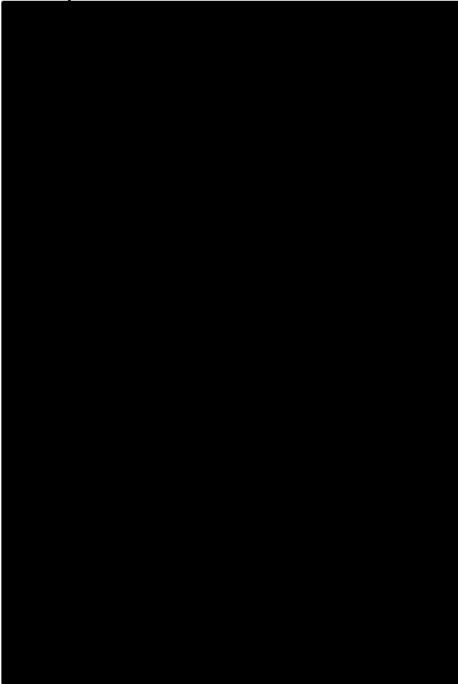
**PAYROLL DATA FORM
LAEC**

TO: Payroll Clerk, Administration Building

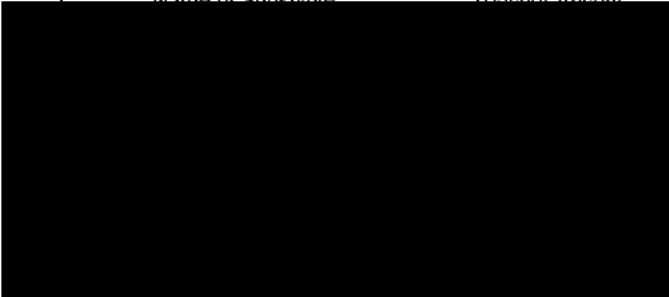
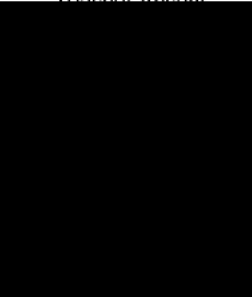
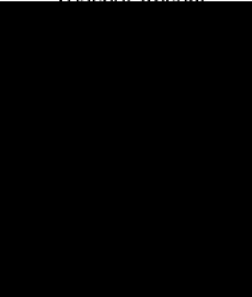
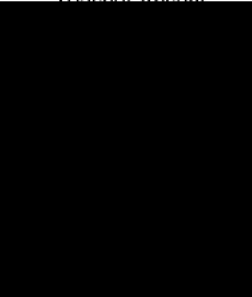
page 2

The following is a correct report of the attendance of the employee(s) for the period:

Beginning: 5/11/26 – 5/22/26

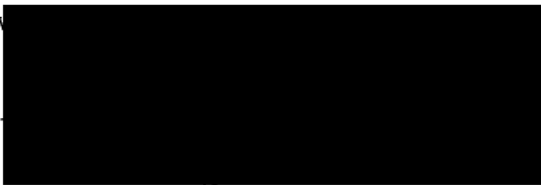
Name	Insert Dates		Total Days	Reason
	AM	5/11/26 - 5/15/26	5	Illness
	PM	5/11/26 – 5/15/26		
	AM	5/11/26, 5/12/26	2	Illness
	PM	5/11/26, 5/12/26		
	AM	5/11/26, 5/12/26, 5/22/26	3	Illness
	PM	5/11/26, 5/12/26, 5/22/26		
	AM	5/11/26 – 5/15/26	5	Personal Day
	PM	5/11/26 – 5/15/26		
	AM	5/11/26 – 5/22/26	10	FMLA
	PM	5/11/26 – 5/22/26		
	AM	5/11/26	1	Illness
	PM	5/11/26		
	AM	5/12/26	1	School Business
	PM	5/12/26		
	AM	5/12/26	1	School Business
	PM	5/12/26		

RECORD OF SUBSTITUTES (Do not list hourly employees)

Name of Substitute	Teacher Absent	Insert Dates and Times (.)		Total Days
		AM	5/11/26	1 /
		PM	5/11/26	
		AM	5/14/26	1 /
		PM	+	
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		

(*) Should a substitute teacher work a split shift, please indicate departure under AM or PM.

SIGNATURE OF PRINCIPAL

 5/26/26

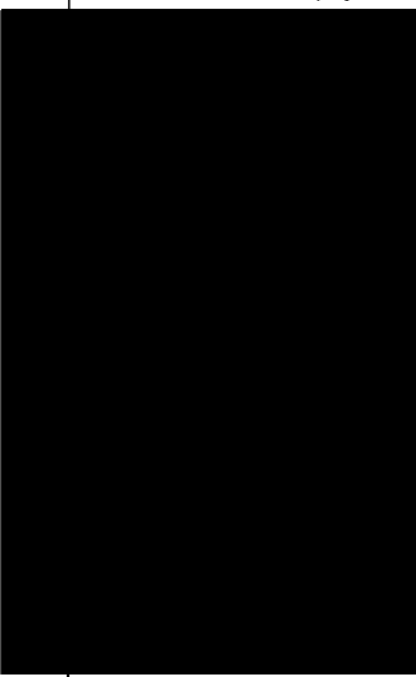
**PAYROLL DATA FORM
LAEC**

TO: Payroll Clerk. Administration Building

page 3

The following is a correct report of the attendance of the employee(s) for the period:

beginning: 5/11/26 – 5/22/26

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	5/12/26	1	School Business
	PM	5/12/26		
	AM	5/12/26	1	School Business
	PM	5/12/26		
	AM	5/12/26	1	School Business
	PM	5/12/26		
	AM	5/22/26	1 ½	Illness
	PM	5/12/26, 5/22/26		
	AM	5/12/26	1	Personal Day
	PM	5/12/26		
	AM	5/12/26	½	Illness
	PM			
	AM	5/12/26, 5/22/26	2	Illness
	PM	5/12/26, 5/22/26		
	AM	5/15/226	1 ½	Illness
	PM	5/12/26, 5/15/26		

RECORD OF SUBSTITUTES (Do not list hourly employees)

Name of Substitute	Teacher Absent	Insert Dates and Times (.)		Total Days
		AM	5/21/26	1 ½ ✓
		PM	5/12/26, 5/21/26	
		AM	5/12/26	1 ✓
		PM	5/12/26	
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		

(*) Should a substitute teacher work under AM or PM.

SIGNATURE OF PRINCIPAL



5/26/26

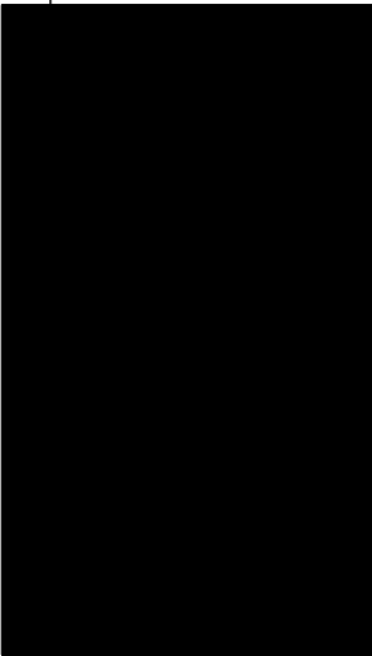
**PAYROLL DATA FORM
LAEC**

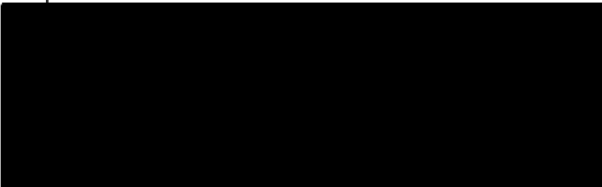
TO: Payroll Clerk. Administration Building

page 4

The following is a correct report of the attendance of the employee(s) for the period:

Beginning: 5/11/26 – 5/22/26

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	5/12/26	1	Personal Day
	PM	5/12/26		
	AM	5/12/26	1	
	PM	5/12/26		
	AM	5/12/26	1	
	PM	5/12/26		
	AM	5/13/26	1	Personal Day
	PM	5/13/26		
	AM		½	Illness
	PM	5/13/26		
	AM	5/13/26, 5/20/26, 5/22/26	2 ½	Illness
	PM	5/13/26, 5/20/26		
	AM	5/15/26	½	Illness
	PM	5/14/26, 5/15/26	1	
	AM	5/14/26	1	Illness
	PM	5/14/26		

RECORD OF SUBSTITUTES (Do not list hourly employees)				
Name of Substitute	Teacher Absent	Insert Dates and Times (.)		Total Days
		AM	5/13/26	1 ✓
		PM	5/13/26	
		AM	5/14/26	1 ✓
		PM	5/14/26	
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		

(*) Should a substitute teacher work a full day, please indicate departure under AM or PM.

SIGNATURE OF PRINCIPAL



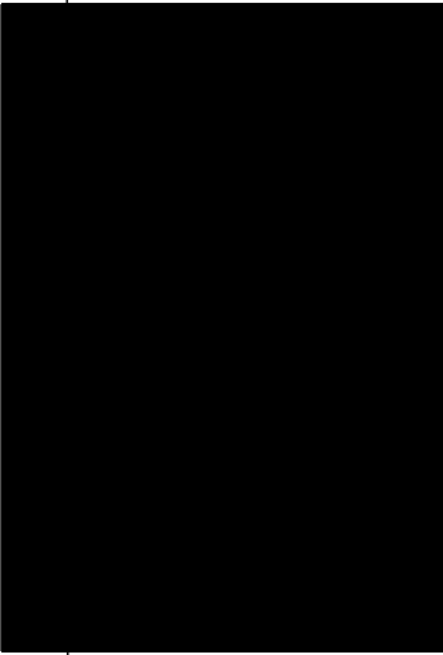
5/26/26

**PAYROLL DATA FORM
LAEC**

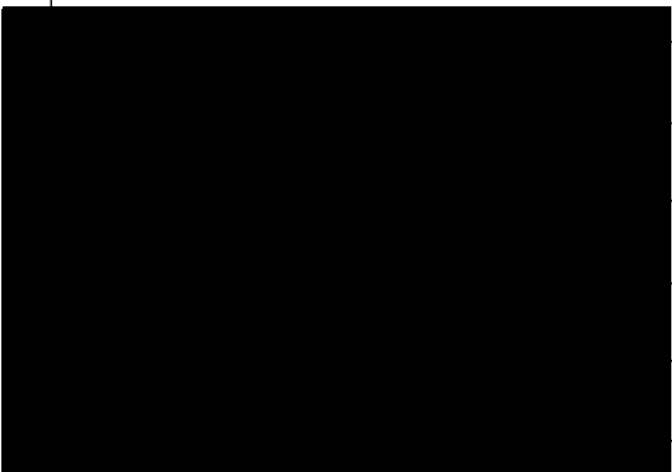
TO: Payroll Clerk, Administration Building

page 5

*The following is a correct report of the attendance of the employee(s) for the period:
beginning: 5/11/26 – 5/22/26*

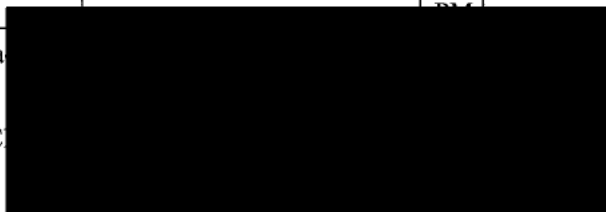
Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	5/15/26	1/2	Illness
	PM	5/14/26, 5/15/26	1	Personal Day
	AM		1/2	Illness
	PM	5/14/26		
	AM	5/15/26	1	Personal Day
	PM	5/15/26		
	AM	5/15/26	1	Personal Day
	PM	5/15/26		
	AM	5/15/26	1	Illness
	PM	5/15/26		
	AM	5/15/26	1	Illness
	PM	5/15/26		
	AM	5/15/26	1	Illness
	PM	5/15/26		
	AM		1/2	Illness
	PM	5/15/26		

RECORD OF SUBSTITUTES (Do not list hourly employees)

Name of Substitute	Teacher Absent	Insert Dates and Times (.)	Total Days
		AM 5/14/26	1 ✓
		PM 5/14/26	
		AM 5/15/26	1 ✓
		PM 5/15/26	
		AM 5/12/26, 5/15/26	2 ✓
		PM 5/12/26, 5/15/26	
		AM 5/15/26	1 ✓
		PM 5/15/26	
		AM 5/15/26	1 ✓
		PM 5/15/26	
		AM	
		PM	
		AM	
		PM	

(*) Should a substitute teacher be absent, please indicate the departure under AM or PM.

SIGNATURE OF PRINCIPAL

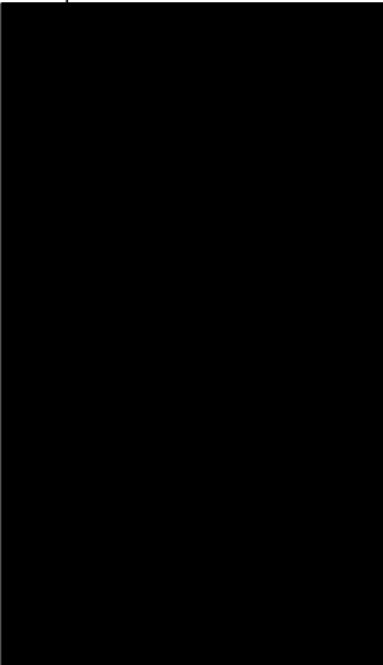


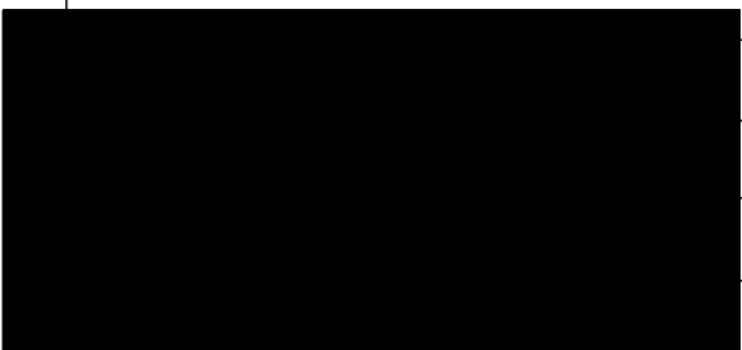
5/26/26

**PAYROLL DATA FORM
MAHONING ELEMENTARY**

TO: Payroll Clerk, Administration Building
page 6

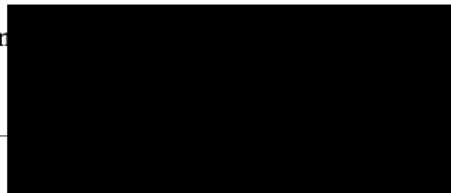
*The following is a correct report of the attendance of the employee(s) for the period:
beginning: 5/11/26 – 5/22/26*

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM		½	Illness
	PM	5/15/26		
	AM	5/15/26	1	Personal Day
	PM	5/15/26, 5/19/26	½	
	AM	5/15/26	1	Illness
	PM	5/15/26		
	AM	5/15/26	½	Illness
	PM			
	AM	5/18/26 – 5/22/26	4	Personal Day
	PM	5/18/26 – 5/22/26	1	
	AM	5/18/26	1	Illness
	PM	5/18/26		
	AM		½	Illness
	PM	5/18/26		
	AM		½	Illness
	PM	5/18/26		

RECORD OF SUBSTITUTES (Do not list hourly employees)				
Name of Substitute	Teacher Absent	Insert Dates and Times (.)		Total Days
		AM	5/18, 5/19, 5/20, 5/21, 5/22	5 ✓
		PM	5/18, 5/19, 5/20, 5/21, 5/22	
		AM	5/18/26	1 ✓
		PM	5/18/26	
		AM	5/19/26	1 ✓
		PM	5/19/26	
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		

(*) Should a substitute teacher work less than a full day, indicate the time worked under AM or PM.

SIGNATURE OF PRINCIPAL



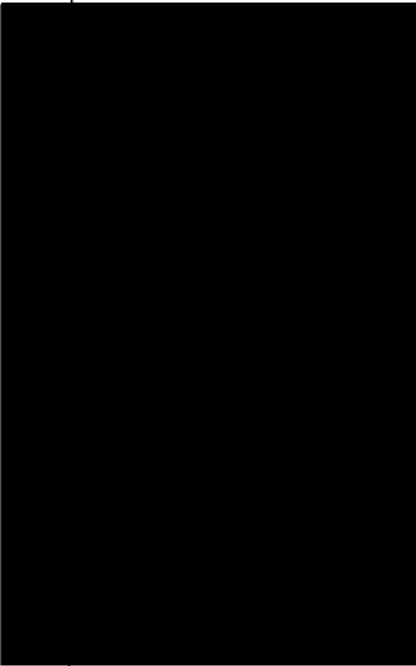
5/24/26

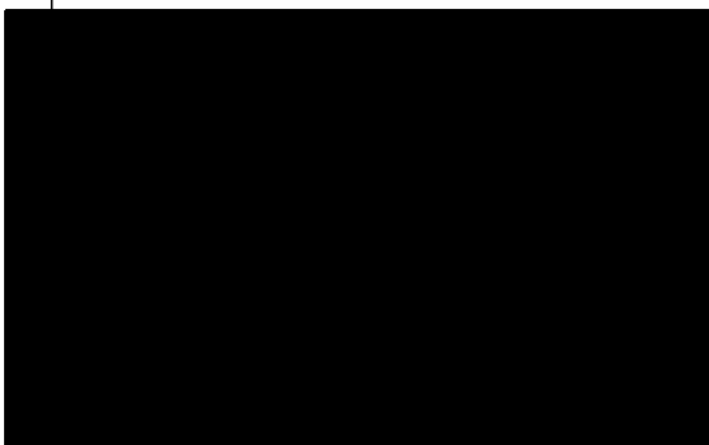
PAYROLL DATA FORM
LAEC

TO: Payroll Clerk, Administration Building

page 7

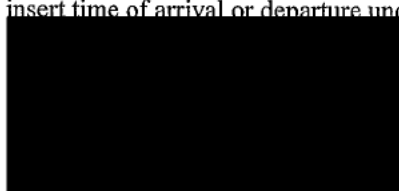
*The following is a correct report of the attendance of the employee(s) for the period:
beginning: 5/11/26 – 5/22/26*

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	5/18/26	1	Illness
	PM	5/18/26		
	AM	5/19/26	1	Illness
	PM	5/19/26		
	AM	5/19/26	1	Personal Day
	PM	5/19/26		
	AM	5/20/26	1	Personal Day
	PM	5/20/26		
	AM	5/20/26	1	Illness
	PM	5/20/26		
	AM	5/20/26	½	Illness
	PM			
	AM		½	Illness
	PM	5/20/26		
	AM	5/19/26 – 5/22/26	4	
	PM	5/19/26 – 5/22/26		

RECORD OF SUBSTITUTES (Do not list hourly employees)				
Name of Substitute	Teacher Absent	Insert Dates and Times (.)		Total Days
		AM	5/18/26	1 ✓
		PM	5/18/26	
		AM	5/19/26	1 ✓
		PM	5/19/26	
		AM	5/20/26	1 ✓
		PM	5/20/26	
		AM	5/20/26	1 ✓
		PM	5/20/26	
		AM	5/20/26	1 ✓
		PM	5/20/26	
		AM		
		PM		
		AM		
		PM		

(*) Should a substitute teacher work less than a full day, insert time of arrival or departure under AM or PM.

SIGNATURE OF PRINCIPAL/HEAD TEACHER



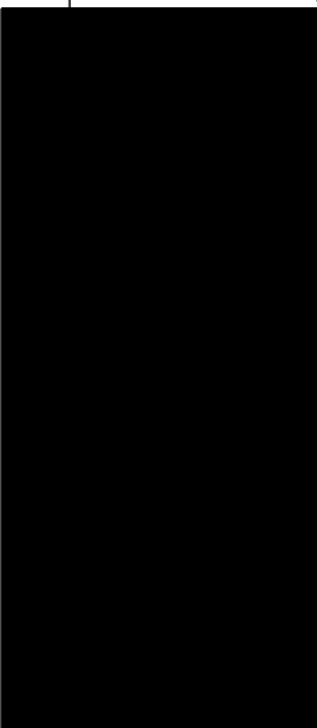
5/24/26

**PAYROLL DATA FORM
LAEC**

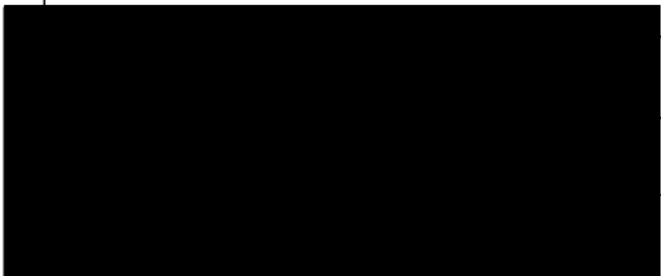
TO: Payroll Clerk, Administration Building

page 8

*The following is a correct report of the attendance of the employee(s) for the period:
beginning: 5/11/26 – 5/22/26*

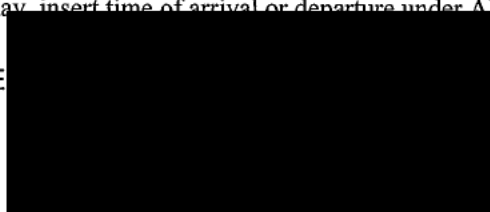
Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	5/20/26 – 5/22/26	1	School Business
	PM	5/20/26 – 5/22/26	2	Personal Day
	AM	5/21/26	1	School Business
	PM	5/21/26		
	AM	5/21/26	1	Illness
	PM	5/21/26		
	AM	5/22/26	1	Personal Day
	PM	5/22/26		
	AM	5/22/26	1	Illness
	PM	5/22/26		
	AM	5/22/26	1	Illness
	PM	5/22/26		
	AM	5/22/26	1	Personal Day
	PM	5/22/26		
	AM	5/22/26	1	Personal Day
	PM	5/22/26		

RECORD OF SUBSTITUTES (Do not list hourly employees)

Name of Substitute	Teacher Absent	Insert Dates and Times (.)		Total Days
		AM	5/20/26	1 /
		PM	5/20/26	
		AM	5/22/26	1 /
		PM	5/22/26	
		AM	5/21/26	1 /
		PM	5/21/26	
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		

(*) Should a substitute teacher work less than a full day, insert time of arrival or departure under AM or PM.

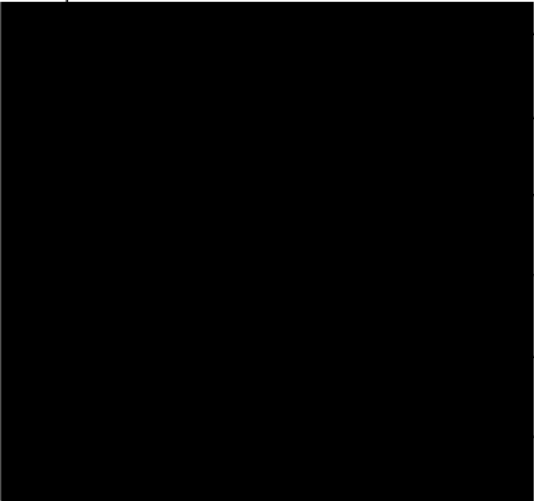
SIGNATURE OF PRINCIPAL/HEAD TEACHER

 5/26/26

**PAYROLL DATA FORM
LAEC**

TO: Payroll Clerk, Administration Building
page 9

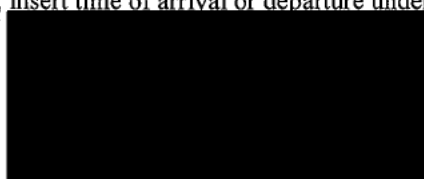
*The following is a correct report of the attendance of the employee(s) for the period:
beginning: 5/11/26 – 5/22/26*

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	5/22/26	1	Personal Day
	PM	5/22/26		
	AM	5/22/26	½	Illness
	PM			
	AM	5/22/26	½	Illness
	PM	5/21/26, 5/22/26	1	Personal Day
	AM		½	Illness
	PM	5/21/26		
	AM	5/22/26	1	Personal Day
	PM	5/22/26		
	AM			
	PM			
	AM			
	PM			
	AM			
	PM			

RECORD OF SUBSTITUTES (Do not list hourly employees)				
Name of Substitute	Teacher Absent	Insert Dates and Times (.)		Total Days
		AM	5/22/26	1 ✓
		PM	5/22/26	
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		
		AM		
		PM		

(*) Should a substitute teacher work less than a full day, insert time of arrival or departure under AM or PM.

SIGNATURE OF PRINCIPAL/HEAD TEACHER



5/26/26

RECORD OF SUBSTITUTES		(Do not list hourly employees)	
Name of Substitute	Teacher Absent	Insert Dates and Times (.)	Total Days
		AM 5/11-5/15, 5/18-5/22	10 /
		PM 5/11-5/15, 5/18-5/22	
		AM 5/12	1 /
		PM 5/12	
		AM 5/13	1 /
		PM 5/13	
		AM 5/19, 5/20, 5/21	3 /
		PM 5/19, 5/20, 5/21	
		AM	
		PM	
		AM	
		PM	
		AM	
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		PM	
		AM	
		PM	

(*) Should a substitute teacher work less than a full day, insert time of arrival or departure under AM or PM.

SIGNATURE OF PRINCIPAL/PRINCIPAL'S SECRETARY

PAYROLL DATA FORM - LEHIGHTON AREA MIDDLE SCHOOL

PAGE 1 OF 3

TO: Payroll Clerk. Administration Building

The following is a correct report of the attendance of the employee(s) for the period:
beginning: Monday, May 11, 2026 and ending Friday, May 22, 2026

Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	5/11-5/15, 5/18-5/22	10	Unpaid/Parental Leave
	PM	5/11-5/15, 5/18-5/22		
	AM	5/11-5/15, 5/18, 5/19, 5/20	8	Illness (5) Personal (3)
	PM	5/11-5/15, 5/18, 5/19, 5/20		
	AM	5/11	1	Personal
	PM	5/11		
	AM	5/11, 5/18	2	Personal
	PM	5/11, 5/18		
	AM	5/11, 5/18, 5/20, 5/22	4	Personal (3) School Business (1)
	PM	5/11, 5/18, 5/20, 5/22		
	AM	5/15, 5/22	3	School Business
	PM	5/11, 5/15, 5/18, 5/22		
	AM	5/11	1/2	Illness
	PM			
	AM	5/11, 5/20, 5/21, 5/22	4	Illness (2) Personal (1) School Business (1)
	PM	5/11, 5/20, 5/21, 5/22		
	AM	5/11, 5/15, 5/21	3	Illness (2) Personal (1)
	PM	5/11, 5/15, 5/21		
	AM	5/11-5/15	5	Personal
	PM	5/11-5/15		
	AM	5/11	1	Personal
	PM	5/11		
	AM	5/11, 5/14, 5/15	2-1/2	Illness (1-1/2) School Business (1)
	PM	5/14, 5/15		
	AM	5/11, 5/21	2	Illness
	PM	5/11, 5/21		
	AM	5/11, 5/22	2	Illness (1) Personal (1)
	PM	5/11, 5/22		
	AM	5/15	1-1/2	Illness
	PM	5/12, 5/15		
	AM	5/12	1	Illness
	PM	5/12		
	AM	5/12	1	Illness
	PM	5/12		
	AM	5/13	1	Illness
	PM	5/13		
	AM	5/18	1-1/2	Illness
	PM	5/13, 5/18		
	AM	5/14	1-1/2	Illness (1/2) School Business (1)
	PM	5/13, 5/14		

PAYROLL DATA FORM - LEHIGHTON AREA MIDDLE SCHOOL

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Name of Employee Absent	Insert Dates		Total Days	Reason
	AM	5/14	1	School Business
	PM	5/14		
	AM	5/14	1	Illness
	PM	5/14		
	AM	5/15, 5/20	2	School Business (1) Illness (1)
	PM	5/15, 5/20		
	AM	5/15, 5/21, 5/22	3	Vacation
	PM	5/15, 5/21, 5/22		
	AM	5/15, 5/19	2	School Business (1) Illness (1)
	PM	5/15, 5/19		
	AM	5/15	1	School Business
	PM	5/15		
	AM	5/18-5/22	5	Illness
	PM	5/18-5/22		
	AM	5/18	1	Illness
	PM	5/18		
	AM	5/19, 5/20, 5/21, 5/22	4	Personal
	PM	5/19, 5/20, 5/21, 5/22		
	AM	5/19	1	Illness
	PM	5/19		
	AM	5/19	1/2	Illness
	PM			
	AM	5/20, 5/21, 5/22	3	Personal
	PM	5/20, 5/21, 5/22		
	AM	5/21, 5/22	2	School Business
	PM	5/21, 5/22		
	AM	5/22	1	Vacation
	PM	5/22		
	AM	5/22	1	Personal
	PM	5/22		
	AM	5/22	1	Personal
	PM	5/22		
	AM	5/22	1	Personal
	PM	5/22		
	AM	5/22	1	School Business
	PM	5/22		
	AM	5/22	1	School Business
	PM	5/22		
	AM	5/22	1	School Business
	PM	5/22		
	AM	5/22	1	School Business
	PM	5/22		

5/29/2026

EMP#	LAST	FIRST	5/11/26	5/12/26	5/13/26	5/14/26	5/15/26	5/18/26	5/19/26	5/20/26	5/21/26	5/22/26	TOTAL	Pay of:
1286													0.00	0.00
40													0.00	0.00
1912													0.00	0.00
1898													0.00	0.00
1862													0.00	0.00
73													0.00	0.00
1803													0.00	0.00
1960													0.00	0.00
TG													0.00	0.00
1908													0.00	0.00
1159													0.00	0.00
1946													0.00	0.00
TG													0.00	0.00
1802													0.00	0.00
1961			0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50			6.00	720.00
1109													0.00	0.00
1955													0.00	0.00
1900													0.00	0.00
1099													0.00	0.00
1883													0.00	0.00
1818													0.00	0.00
1895													0.00	0.00
1892													0.00	0.00
504													0.00	0.00
1779													0.00	0.00
1907													0.00	0.00
333													0.00	0.00
1853													0.00	0.00
970													0.00	0.00
1901			0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	9.00	1,170.00
													15.00	\$1,890.00

HIGH SCHOOL PAYROLL DATA FORM

Emp	05/11/26	05/12/26	05/13/26	05/14/26	05/15/26	05/18/26	05/19/26	05/20/26	05/21/26	05/22/26
747										
487					S					
453					M					
1876				P						
273										
654										
985		S								
1944		P	P							
298	P	P								
483										
1892					S					
258				1/2 S						
498										
524		M				S				
1856						P				
1700					M					
427										
1963					S					
1840					S					
888										
675	off	off	off	off	off	off	off	off		
1231										
1894										
1371										
431										
1753					S	1/2 S				
735										
1084										

S Sick
 P Personal
 J Jury Duty
 B Bereavement
 M School Business
 U Uncompensated Day
 C EFMLA-COVID