

Bath County Board of Education
 405 West Main Street
 Owingsville, KY 40360
 Phone: 606-674-6314
 Fax: 606-674-2647

REQUEST FOR PAYMENT ON PAYROLL

Name: _____ MUNIS ID NO. : _____

Soc. Sec. No.: _____ Account No. : _____

Date Worked	Description	Hours/Days Worked	Hourly/Daily Rate	Amount Due
TOTAL DUE				

I hereby certify that the above is a correct statement of amount due from the above named individual for services rendered as itemized.

Employee Signature: _____ Date: _____
 Principal/Project Director Approval: _____ Date: _____
 Superintendent Approval: _____ Date: _____