



WEST ELIZABETH - JEFFERSON HILLS - PLEASANT HILLS

CYBER SCHOOL INSTRUCTION PAYMENT REQUEST

DATE _____

Complete biweekly & submit to the Cyber School Administrator
at least one week prior to the pay date for that period

NAME OF TEACHER:	EMPLOYEE #	BUDGET CODE C1112139
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DATES OF INSTRUCTION	# OF STUDENTS	RATE	WEEKLY TOTAL

TOTAL DUE

SIGNATURE OF TEACHER	DATE
SIGNATURE OF CYBER SCHOOL ADMINISTRATOR	DATE
SIGNATURE OF TRACY HARRIS, DIRECTOR OF FINANCE	DATE

Separate checks may be issued for amounts over \$100. Please check box if separate check is desired.