



NORTHEASTERN CLINTON CENTRAL SCHOOL DISTRICT
CHAMPLAIN, NEW YORK 12919

CLAIM FORM – SUMMER WORK
(Bus Drivers, School Bus Monitors)

This is to certify that I, _____, have worked in the following capacity:

Date	Work Duties:	Time In:	Time Out:	# of Hours:
	SUMMER SCHOOL			

Signed: _____ Date: _____

Approved By: _____ Date: _____
Supervisor's Signature

INSTRUCTIONS: If you wish to make changes to your federal or state exemptions, you need to complete a new W-4 & IT-2104 (Employee's Withholding Allowance Certificate). These forms are available in the Northeastern Clinton Business Office.

Forward completed form(s) to:

Kelsey Monette, School Personnel Specialist
Payroll Office
Middle School Building, Champlain

FOR OFFICE USE ONLY

TOTAL HOURS _____ X RATE / HOUR \$ _____ = \$ _____

PAYROLL NO. _____ DATE: _____

AUTHORIZED: _____ BUDGET CODE: _____
