

Leaders in Community Service Time Sheet			Pay Period End Date		
LCS Member Na	ame:		Supervisor Nam	e:	
Date	Shift One		Shift Two (if applicable)		
	Time In	Time Out	Time In	Time Out	Total Hours
Total /				proved Hours:	
		re an accurate re during the previo		worked by the al	bove Leaders
Leaders in Community Service Member				Date	
Supervisor				Date	

Once completed submit via fax to 417-836-7608