



**BAKERSFIELD CITY SCHOOL DISTRICT**  
EDUCATION CENTER - 1300 BAKER ST. - BAKERSFIELD, CA - 93305  
**FISCAL SERVICES – PAYROLL DIVISION**

**TIMESHEET ENDORSEMENT**

Please complete the following designating representatives from your school/department for signing timesheets, and picking up department checks.

School Site/ Department Name: \_\_\_\_\_ Location #: \_\_\_\_\_

Principal/Department Head Printed Name: \_\_\_\_\_

**Employee No. 1**

Designated Representative: \_\_\_\_\_ EID #: \_\_\_\_\_

Designated Representative Signatures: \_\_\_\_\_

Pick up checks only

**Employee No. 2**

Designated Representative: \_\_\_\_\_ EID #: \_\_\_\_\_

Designated Representative Signatures: \_\_\_\_\_

Pick up checks only

**Employee No. 3**

Designated Representative: \_\_\_\_\_ EID #: \_\_\_\_\_

Designated Representative Signatures: \_\_\_\_\_

Pick up checks only

Principal/Department Head Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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**NOTE: NO EMPLOYEE MAY SIGN HIS/HER OWN TIMESHEET OR ABSENCE REPORT.**

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**RETURN TO:**  
**DEPARTMENT OF FISCAL SERVICES**  
**PAYROLL SUPERVISOR**