

**Eastern Local School District
Completion of Duties Form**

The following employee is hereby entitled to ONE HALF or FULL PAY as per his or her supplemental contract for the season/period of in the performance of duty as .

Employee:

The following signatures are needed to certify that all duties and obligations for the above position have been met or completed before the treasurer's office may issue the employee's pay.

(for coaches only)	Head Coach:	<input type="text"/>	Date:	<input type="text"/>
(for coaches only)	Athletic Director:	<input type="text"/>	Date:	<input type="text"/>
	Building Principal:	<input type="text"/>	Date:	<input type="text"/>
	Superintendent:	<input type="text"/>	Date:	<input type="text"/>
	Treasurer:	<input type="text"/>	Date:	<input type="text"/>