## **UNION COUNTY PUBLIC SCHOOLS**

## 400 North Church Street Monroe, N.C. 28112

This is to certify	y that I,		, worked in the
		Name	
capacity of	hours at \$	per hour for	
0.00		og o Dublio C	School
Event 1	Date	as a Public S	safety Officer.
2,0002			
I have complete	ed the requirements	of the contract for this e	vent which included a gross salary of
			e for the payment of federal and state
income taxes ar	nd social security ap	oplicable to the compensa	tion received.
	Signature		Cocial Consists #
Signature			Social Security #
		Address	
D	ate		
******	******	*******	*******
For Office Use	Only:		
Date:			
Acct. #:			
Amount Paid:	\$		
Check #:			
Approval:			