

Saint Paul Federation of Educators

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Affiliated with Education Minnesota, AFT-NEA, AFL-CIO

Professional Development – Teaching & Learning Center (TLC)



SAINT PAUL FEDERATION
OF EDUCATORS LOCAL 28

Collaborative Pay Sheet – SPFE & SPPS

Trainer Name _____

Today's Date _____

Course Name: _____

<u>Dates</u>	<u>Activity (prep/class)</u>	<u># Hours</u>	<u>Rate</u>	<u>Amount</u>	<u>SPPS Pymnt? (Y/N)</u>
_____	Prep Time	1	\$40	_____	N
_____	Class	6	\$40	_____	Y
_____	Prep Time	1	\$40	_____	N
_____	Class	6	\$40	_____	Y
_____	Prep Time	1	\$40	_____	N
_____	Class	6	\$40	_____	Y
_____	Prep Time	1	\$40	_____	N
_____	Class	6	\$40	_____	Y
_____	Prep Time	1	\$40	_____	N
_____	Class	6	\$40	_____	Y

TOTAL TO BE PAID BY SPFE to Trainer _____

TOTAL TO BE PAID BY SPPS to Trainer for these hours (upon course completion) _____

TOTAL TO BE PAID BY SPFE to SPPS (half) for these hours (upon course completion) _____

I hereby certify that this is a true and correct statement of the expenses I am claiming.

I authorize payment of these Training hours.

Signature of Trainer _____

Signature of PD Coordinator _____

DO NOT WRITE IN SECTION BELOW

Date Paid / Date Mailed _____

Signature / Authorization Local Treasurer _____

Funding Notes: _____

Signature / Authorization Local President _____

Original : Vdr paid file Copy 1: SPFE Payroll Copy 2 (if applicable): SPPS Ck Documentation