

Ithan Elementary School PTO Club Independent Contractor Report Summary of Hours

Club Name _____

Chairperson Name: _____

Date Submitted _____

Chairperson Signature: _____

Instructor's Name: _____

Instructor's Address: _____

Instructor's Name	Dates Worked	Hours	Rate/Hour*	Amount Paid
TOTALS				

***NOTE:**

Teachers rate: \$45/hour

Student Assistants (16 years and above) rate: \$20/hour

Check #:

Date: _____

Amount Paid: _____