

**Wakefield-Marenisco School District**

**Supplemental Pay Request Form**

All payments for extra services will be paid upon the completion of the services in one lump sum payment.

All activities will be paid per schedule D in the contract. In order to receive compensation, all duties relating to the activity must be fulfilled.

Name: \_\_\_\_\_

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

Activity: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Superintendent Approval: \_\_\_\_\_

-----  
*Business Office Only*

*Amount to be paid:* \_\_\_\_\_

*Date paid:* \_\_\_\_\_