

Classified Facilities - Due in Payroll on the 11th of each month -

Name _____

Employee ID # _____

Date	Absence		Pre-approved Overtime or Comp Time		OT/CT Reason
	Code	Hours	Code	Hours	
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Total:		0	Total:		0

Summarize & Total (one line per code)					
Employee Use: enter total per code					
Absence		Pre-approved Overtime or Comp Time			
Code	Hours	Code	Hours		
Total:		0	Total:		0

CODES:

Leaves taken:

- Bereavement (*specify relationship*) BRV
- _____
- Comp Time Taken CTU
- Conference CNF
- Emergency Leave EUS
- Floating Holiday FHU
- Jury Duty JUR
- (*provide jury duty verification*)
- Personal Necessity PNU
- Sick Leave SUS
- Vacation VUS
- Other, please specify:

Overtime or Comp Time:

- Overtime OT
- Comp Time Earned CT

I certify that the above hours correctly report absences taken and overtime earned

Employee Signature _____ Date _____

Manager Signature _____ Date _____

- Budget Code:**
- 1109-40306-2393-681000 (Facilities Rentals)
 - 1100-3020-2393-653000 (Custodial Overtime)
 - 1100-3020-2393-655000 (Grounds Overtime)
 - 1100-3020-2393-651000 (Maintenance Overtime)

PLEASE NOTE: IN THE SUMMARIZE SECTION, USE ONE LINE PER CODE, ADD TOTAL HOURS PER CODE