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**Total Hours:** \_\_\_\_\_ **Employee Signature:** \_\_\_\_\_

**Total Overtime Hours:** \_\_\_\_\_ **Employer Signature:** \_\_\_\_\_

**Overtime must be approved by the employer.**

**1st - 15th: Due by the 18th      16th - End of Month: Due by the 3rd of the following month.**

**OFFICE USE ONLY: DATE RECEIVED:** \_\_\_\_\_