OVERTIME REPORT

Employee Section	
Employee's name:	Department/Division:
Overtime worked:	Name of supervisor who gave prior approval:
Date:	Day:
Time From ☐ AM ☐ PM To ☐ AM ☐ PM	Total hours worked: Hrs. Mins.
Reason for overtime (give details):	
Employee's signature:	Date submitted:

<div align="center">Manager Section</div>

Overtime category: ☐ Compensatory Time Off (CTO)

   Note: only when legally applicable

   ☐ Time-and-One-Half Pay

Approve	Disapprove	Signature	Date

Human Resources Section	(x) Completed
Verify figures. Calculate for proper overtime credit.	
Enter hours as calculated here:	
Enter additional compensation here:	