CITY OF CANTON COMPENSATORY TIME/OVERTIME REPORT POLICE DEPARTMENT USE ONLY

| EMPLOYEE NAME DATE: () COMPENSATORY TIME (EARNED) () PAID OVERTIME | |
|---|---|
| FROM am/ | om TO am/pm (DATE) |
| NUMBER OF HOURS | Debit Fund: |
| REASON FOR WORKING | |
| () Stand-By Subpoena (SB/CSB) () Court Time (CRT/CCT) () Effect Search Warrant (SW/CSW) () Minimum Manning (CPPA) MM () Minimum Manning (FOP) MMF () DB Call Back (CAD) () Vice Call Back (CAV) () Coban Admin (OTC) | () K-9 Training (KT/CKT) () SWAT (ST/CST) () Drug Raid (DR/CDR) () Case Follow-up (CF/CCF) () Training (OTR) () NOVCC Grant (ONG) () Shift Call Back (CAS) () Other (OT/CA/CTE) () HOF HFO/CTF |
| EMPLOYEE SIGNATURE | |
| SUPERVISOR VERIFYING TIME | |
| DIVISION COMMANDER | |
| POLICE CHIEF APPROVAL | |
| SAFETY DIRECTOR APPROVAL | |
| CASE # AF OTHER | REST # ACCIDENT # |
| DESCRIPTION/LOCATION | |

No overtime to be granted when time involved is less than five (5) minutes. All time is to be computed in fifteen (15) minute, quarter (1/4) hour, half (1/2) hour, three-quarters (3/4) hour, and one (1) hour intervals.