# COMPENSATORY TIME REPORT

**EMPLOYEE_____ DEPARTMENT_____ SUPERVISOR_____**

| Date Overtime Worked | # Hours Overtime Worked | # Hours Comp Time Earned (1 ½ times hrs worked) | Supervisor's Initials | Total Hours Due (Cumulative) | | Date Comp Time Used | # Hours Comp Time Used | Supervisor's Initials | Total Hours Remaining (Cumulative) |
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