

CO USE ONLY Posted _____

**PAYROLL EXCEPTIONS
COMPENSATORY TIME FORM**

Employee Name _____ Building _____

For the pay period ending with the payroll cutoff date of _____ I would like to
convert _____ hours of overtime from paid overtime to compensatory time.

Employee's Signature _____ Date _____

Supervisor's Signature _____ Date _____

(Original to Payroll Office. If you want copies you need to make them.)

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