

PAY PERIOD: From 10 123105 to 11 05105

DAY DATE	46 REG.	22 VAC	23 SICK	24 HOL	28 COMP	OT @ 6.5	OT @ 1.5	MISC	MISC OT	ACCOUNT NUMBER	SUPVSR'S INITIALS
SU: <u>23</u>	<u>8.0</u>										
MON: <u>24</u>	<u>8.0</u>						<u>0.5</u>				
TU: <u>25</u>	<u>8.0</u>										
WD: <u>26</u>	<u>X</u>										
TH: <u>27</u>	<u>X</u>										
FR: <u>28</u>	<u>X</u>										
SA: <u>29</u>	<u>X</u>							<u>8.0 (ADJ USED)</u>			
SU: <u>30</u>	<u>8.0</u>										
MON: <u>31</u>	<u>8.0</u>						<u>1.5</u>				
TU: <u>11/01</u>	<u>8.0</u>										
WD: <u>02</u>	<u>8.0</u>										
TH: <u>03</u>	<u>8.0</u>						<u>3.0</u>				
FR: <u>04</u>	<u>X</u>										
SA: <u>05</u>	<u>X</u>										
TOTAL:	<u>64.0</u>						<u>5.0</u>	<u>8.0 (ADJ USED)</u>			

EMPLOYEE SIGNATURE: Sgt. A Colborn

SUPERVISOR SIGNATURE: [Signature]

COMMENTS: 0.5 HRS OT FOR LATE DVO INVESTIGATION - 10/42 @ 2030
1.5 HRS OT FOR LATE ARREST/HIT ON WARRANT - 10/42 @ 2118
3.0 HRS OT TO ASSIST CASO MISSING PERSON - 10/42 @ 2250

EMPL. NO. 6641- **0 432** MO **11** DAY **05** YR **05** LAST NAME **COLBORN** INITIALS **AL** SHIFT WORKED **#2**

EXCEPTION HOURS		TIME OFF REQUEST	
20. Reg. Day Off	.	24. Holiday	.
21. Abs. w/o Pay	.	28. Comp Used	.
22. Vacation	.	29. Funeral	.
23. Sick	.	41. Adjustment Used	.

ACTIVITY	REG. HOURS	O/TIME ACT.HRS	ACCT#
40. Adjustment Earned	.		
42. Patrol	.		
43. Criminal Investigation	.	7.0 <i>act</i>	
44. Transport (On-Duty)	.		Mi.
45. Misc. Assign-Type	.		
45. Misc. Assign-Type	.		
45. Misc. Assign-Type	.		
46. Headquarters Duty	.		
47. Jail	.		
48. Snowmobile	.		5213000
49. Accident Investigation	.		
52. Report Writing	.		
53. Training-Type	.		
53. Training-Type	.		
54. D.A./Court	.		
56. Process	.		
61. Bailiff	.		
62. Water Safety	.		5214000
63. S.O.S.	.		
66. Worker's Comp	.		
68. Emerg. Management	.		
69. Photo Lab	.		
70. SCUBA	.		
71. Funded Grant/Prog.	.		
72. Court Call-In (2 Hr.)	.		
73. Court Call-In (4 Hr.)	.		
74. Holiday (4 Hr. Max.)	.		
75. Transport (Off-Duty)	.		Mi.
76. Military Leave	.		
78. Call-In (2 Hr.)	.		
79. Call-In (4 Hr.)	.		
80. Field Trng. Officer	.		1 Hr Max

ACTIVITY:

22 VACATION	
24 HOLIDAY	
28 COMP	
41 ADJUSTMENT	
53 TRAINING	

DATE OF REQUEST MO. DA. YR.

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APPROVED DENIED

Indicate days off requested by placing V = VACATION, H = HOLIDAY, C = COMP, S = SICK, T = TRAINING, A = ADJUSTMENT USED, A/E = ADJ EARNED on regular day off, in the correct date of month shown below. If regular days off occur immediately before, during, or immediately after any of the requested days off, so indicate by placing an X in the correct dates below.

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	Month Of:			

Sgt. A Colborn
EMPLOYEE SIGNATURE

act
APPROVED BY

Comments: 7.0 HRS OT TO ASSIST CALUMET COUNTY ON MISSING PERSON CASE
10/41 @ 1600 - 10/42 @ 2300

PAY PERIOD: From 10/23/05 to 11/05/05

DAY DATE	46 REG.	22 VAC	23 SICK	24 HOL	28 COMP	OT @ ST	OT @ 1.5	MISC	MISC OT	ACCOUNT NUMBER	SUPRVSR'S INITIALS
SU: <u>23</u>	X										
HN: <u>24</u>	V	8									
TU: <u>25</u>	8						1.0				
WD: <u>26</u>	6							2-HRS. ADJ.		USED	
TH: <u>27</u>	8						1.5				
FR: <u>28</u>	8										
SA: <u>29</u>	X										
SU: <u>30</u>	X										
HN: <u>31</u>	8						1.0				
TU: <u>01</u>	8						1.0				
WD: <u>02</u>	V	8									
TH: <u>03</u>	8						3.5				
FR: <u>04</u>	8										
SA: <u>05</u>	X						11				
TOTAL:	62	16					19			2-HRS. ADJ-USED	

EMPLOYEE SIGNATURE: James M. Lenk

SUPERVISOR SIGNATURE: _____

COMMENTS: 10/25: Evid. Room (1500-1600)
10/27: Evid. Room (1430-1600)
10/31: Late followup on 505-7800 (1430-1530)
11/01: Meeting w/ D.A. Rohrer (1500-1600)

11-03: Assist. CASO on Missing Adult - #05-8844 (1900-2230) - 05-9213
11-05: Assist w/ Missing from CASO - #059213 (1200-2300)

PAY PERIOD: From 10/23/05 to 11/05/05

DAY DATE	46 REG.	22 VAC	23 SICK	24 HOL	28 COMP	OT @ 1.5	OT @ 1.5	MISC	MISC OT	ACCOUNT NUMBER	SUPVSR'S INITIALS
SU: <u>23</u>	X										
MON: <u>24</u>	8										
TU: <u>25</u>	8										
WD: <u>26</u>	S/A		3.5					4.5	Adjusted		
TH: <u>27</u>	8										
FR: <u>28</u>	8										
SA: <u>29</u>	8										
SU: <u>30</u>	X										
MON: <u>31</u>	8										
TU: <u>1</u>	4.5		3.5								
WD: <u>2</u>	8										
TH: <u>3</u>	C				8		3.0				
FR: <u>4</u>	8										
SA: <u>5</u>	8						7.5				
TOTAL:	76.5		7.0		8		10.5	4.5	- Adj. - USED		

EMPLOYEE SIGNATURE: D. Remiker

SUPERVISOR SIGNATURE: James M. Jenk

COMMENTS: 11/02/05 - Called-in 1930-2230hrs. - Missing Adult 2005-8844

10/26/05 Sick time used - Doctor Appts.
11/01/05 " " "

11/05/05 - Halbach Dth Inv. 1600-2330hrs

PAY PERIOD: From 10/23/05 to 11/05/05

DAY DATE	46 REG.	22 VAC	23 SICK	24 HOL	28 COMP	OT @ ST	OT @ 1.5	MISC	MISC OT	ACCOUNT NUMBER	SUPRVR'S INITIALS
SU: <u>23</u>	X										
HN: <u>24</u>	X										
TU: <u>25</u>	8										
WD: <u>26</u>	8										
TH: <u>27</u>	H			8							
FR: <u>28</u>	X										
SA: <u>29</u>	X										
SU: <u>30</u>	X										
HN: <u>31</u>	H			6				2AU			
TU: <u>01</u>	8										
WD: <u>02</u>	8										
TH: <u>03</u>	8						3				
FR: <u>04</u>	H			8							
SA: <u>05</u>	X						12				
TOTAL:	40			22			15	2AU			

EMPLOYEE SIGNATURE: *Dennis Jacobs*

SUPERVISOR SIGNATURE: *James M. Link*

COMMENTS: 11-03 Assist CASO 505-8844 (1930-2230)
11-05: assist CASO - 805-8844 (1100A. - 1100P.)

PAY PERIOD: From 10,23,05 to 11,05,05

DAY DATE	46 REG.	22 VAC	23 SICK	24 HOL	28 COMP	OT @ 1.5	OT @ 1.5	MISC	MISC OT	ACCOUNT NUMBER	SUPRVS'R'S INITIALS
SU: <u>23</u>	<u>8.0</u>										
MON: <u>24</u>	<u>8.0</u>						<u>3.5</u>				
TU: <u>25</u>	<u>8.0</u>										
WD: <u>26</u>	<u>8.0</u>										
TH: <u>27</u>	<u>8.0</u>										
FR: <u>28</u>	<u>8.0</u>										
SA: <u>29</u>	<u>X</u>										
SU: <u>30</u>	<u>X</u>										
MON: <u>31</u>	<u>X</u>										
TU: <u>1</u>	<u>8.0</u>										
WD: <u>2</u>	<u>8.0</u>										
TH: <u>3</u>	<u>8.0</u>										
FR: <u>4</u>	<u>8.0</u>										
SA: <u>5</u>	<u>8.0</u>						<u>4.0</u>				
TOTAL:	<u>88.0</u>						<u>7.5</u>				

EMPLOYEE SIGNATURE: Todd E Hermann

SUPERVISOR SIGNATURE: [Signature]

COMMENTS: 24th ~~2005~~ SQUADS - 61 computer cable
5th 505-8844 Missing female 1200-1600

HANITOWOC COUNTY EMPLOYEE BI-WEEKLY TIME REPORT

SHIFT 4 EMP# 412

EMPLOYEE NAME: B. NACK

PAY PERIOD: From 10,23,05 to 11,5,05

DAY DATE	46 REG.	22 VAC	23 SICK	24 HOL	28 COMP	OT @ ST	OT @ 1.5	MISC ADJ	MISC OT USED EARNED	ACCOUNT NUMBER	SUPVSR'S INITIALS
SU: <u>23</u>	<u>A-X</u>							<u>8</u>	<u>USED</u>		
MN: <u>24</u>	<u>8</u>							<u>2</u>	<u>EARNED</u>		
TU: <u>25</u>	<u>8</u>										
WD: <u>26</u>	<u>8</u>										
TH: <u>27</u>	<u>8</u>										
FR: <u>28</u>	<u>8</u>										
SA: <u>29</u>	<u>X</u>										
SU: <u>30</u>	<u>X</u>										
MN: <u>31</u>	<u>X</u>										
TU: <u>1</u>	<u>8</u>										
WD: <u>2</u>	<u>8</u>										
TH: <u>3</u>	<u>8</u>										
FR: <u>4</u>	<u>8</u>										
SA: <u>5</u>	<u>8</u>						<u>3</u>				
TOTAL:	<u>80</u>						<u>3</u>	<u>8</u>	<u>2</u>		

EMPLOYEE SIGNATURE: B. NACK

SUPERVISOR SIGNATURE: T. NACK

COMMENTS: 24- 2 HRS AE TRAVEL TIME TRAINING 5- 1135-1200 / 200- 2230 AVECY CASE

EMPL. NO. 6641- 0451 MO 11 DAY 05 YR 05 LAST NAME FRANCO INITIALS ML SHIFT WORK/D 4

EXCEPTION HOURS

20. Reg. Day Off	.	24. Holiday	.
21. Abs. w/o Pay	.	28. Comp Used	.
22. Vacation	.	29. Funeral	.
23. Sick	.	41. Adjustment Used	.

TIME OFF REQUEST

ACTIVITY:

22 VACATION		
24 HOLIDAY		
28 COMP		
41 ADJUSTMENT		
53 TRAINING		

ACTIVITY	REG. HOURS	O/TIME ACT.HRS	ACCT#
40. Adjustment Earned	.		
42. Patrol	.		
43. Criminal Investigation	.		
44. Transport (On-Duty)	.		
45. Misc. Assign-Type	.		
45. Misc. Assign-Type	.		
45. Misc. Assign-Type	.		
46. Headquarters Duty	.		
47. Jail	.		
48. Snowmobile	.		5213000
49. Accident Investigation	.		
52. Report Writing	.		
53. Training-Type	.		
53. Training-Type	.		
54. D.A./Court	.		
56. Process	.		
61. Bailiff	.		
62. Water Safety	.		5214000
63. S.O.S.	.		
66. Worker's Comp	.		
68. Emerg. Management	.		
69. Photo Lab	.		
70. SCUBA	.		
71. Funded Grant/Prog.	.		
72. Court Call-In (2 Hr.)	.		
73. Court Call-In (4 Hr.)	.		
74. Holiday (4 Hr. Max.)	.		
75. Transport (Off-Duty)	.		Mi.
76. Military Leave	.		
78. Call-In (2 Hr.)	.		
79. Call-In (4 Hr.)	.		
80. Field Trng. Officer	.		1 Hr Max

DATE OF REQUEST MO. DA. YR.

APPROVED DENIED

Indicate days off requested by placing V = VACATION, H = HOLIDAY, C = COMP, S = SICK, T = TRAINING, A = ADJUSTMENT USED., A/E = ADJ EARNED on regular day off, in the correct date of month shown below. If regular days off occur immediately before, during, or immediately after any of the requested days off, so indicate by placing an X in the correct dates below.

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	Month Of:			

EMPLOYEE SIGNATURE [Signature]

APPROVED BY [Signature]

Comments: Called in 13:40 to 18:10
Security for 2005 - 8844

EMPL. NO.
6641-

0 1 4 1 4 3

MO DAY YR
11 05 05

LAST NAME
HAESE

INITIALS
KT

SHIFT WORKED
4

EXCEPTION HOURS	
20. Reg. Day Off	24. Holiday
21. Abs. w/o Pay	28. Comp Used
22. Vacation	29. Funeral
23. Sick	41. Adjustment Used

TIME OFF REQUEST	
ACTIVITY:	
22 VACATION	
24 HOLIDAY	
28 COMP	
41 ADJUSTMENT	
53 TRAINING	

ACTIVITY	REG. HOURS	O/TIME ACT.HRS	ACCT#
40. Adjustment Earned	.	.	
42. Patrol	.	.	
43. Criminal Investigation	8.0	3.0	Je'
44. Transport (On-Duty)	.	.	Mi.
45. Misc. Assign-Type	.	.	
45. Misc. Assign-Type	.	.	
45. Misc. Assign-Type	.	.	
46. Headquarters Duty	.	.	
47. Jail	.	.	
48. Snowmobile	.	.	5213000
49. Accident Investigation	.	.	
52. Report Writing	.	.	
53. Training-Type	.	.	
53. Training-Type	.	.	
54. D.A./Court	.	.	
56. Process	.	.	
61. Bailiff	.	.	
62. Water Safety	.	.	5214000
63. S.O.S.	.	.	
66. Worker's Comp	.	.	
68. Emerg. Management	.	.	
69. Photo Lab	.	.	
70. SCUBA	.	.	
71. Funded Grant/Prog.	.	.	
72. Court Call-In (2 Hr.)	.	.	
73. Court Call-In (4 Hr.)	.	.	
74. Holiday (4 Hr. Max.)	.	.	
75. Transport (Off-Duty)	.	.	Mi.
76. Military Leave	.	.	
78. Call-In (2 Hr.)	.	.	
79. Call-In (4 Hr.)	.	.	
80. Field Trng. Officer	.	.	1 Hr Max

DATE OF REQUEST MO. DA. YR.

APPROVED -

DENIED -

Indicate days off requested by placing V = VACATION, H = HOLIDAY, C = COMP, S = SICK, T = TRAINING, A = ADJUSTMENT USED., A/E = ADJ EARNED on regular day off, in the correct date of month shown below. If regular days off occur immediately before, during, or immediately after any of the requested days off, so indicate by placing an X in the correct dates below.

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	Month Of:			

EMPLOYER SIGNATURE *[Signature]*

APPROVED BY *[Signature]*

Comments: (1135-1200) (2000-2235) 3.0. OT HRS
2005-8844

PAY PERIOD: From 10,23,05 to 11,05,05

DAY DATE	46 REG	22 VAC	23 SICK	24 HOL	28 COMP	OT @ ST	OT @ 1.5	MISC	MISC OT	ACCOUNT NUMBER	SUPVSR'S INITIALS
SU: <u>23</u>	X										
MO: <u>24</u>	X										
TU: <u>25</u>	X										
WD: <u>26</u>	8.0										
TH: <u>27</u>	8.0										
FR: <u>28</u>	8.0										
SA: <u>29</u>	8.0										
SU: <u>30</u>	8.0										
MO: <u>31</u>	8.0										
TU: <u>01</u>	X										
WD: <u>02</u>	X										
TH: <u>03</u>	X						2.0				
FR: <u>04</u>	8.0										
SA: <u>05</u>	8.0						4.5				
TOTAL:	64						6.5				

EMPLOYEE SIGNATURE: Jason J. Orth

SUPERVISOR SIGNATURE: [Signature]

COMMENTS: 3RD 2 HRS O.T. S.C. MEETING FROM 1200-1400 ON REG OFF DAY.
5TH 4.5 HRS O.T. 605-8844 1200-1630HRS AVERY'S - MISSING PERSON INVESTIGATION.

PAY PERIOD: From 10/23/05 to 11/05/05

DAY DATE	46 REG	22 VAC	23 SICK	24 HOL	28 COMP	OT @ 51	OT @ 1.5	MISC	MISC OT	ACCOUNT NUMBER	SUPVSR'S INITIALS
SU: <u>10/23</u>	<u>8.0</u>										
MN: <u>24</u>	<u>8.0</u>										
TU: <u>25</u>	<u>V</u>	<u>8.0</u>									
WD: <u>26</u>	<u>X</u>										
TH: <u>27</u>	<u>X</u>										
FR: <u>28</u>	<u>X</u>										
SA: <u>29</u>	<u>V</u>	<u>8.0</u>									
SU: <u>30</u>	<u>V</u>	<u>8.0</u>									
MN: <u>31</u>	<u>V</u>	<u>8.0</u>									
TU: <u>11/01</u>	<u>V</u>	<u>8.0</u>									
WD: <u>02</u>	<u>V</u>	<u>8.0</u>									
TH: <u>03</u>	<u>V</u>	<u>8.0</u>									
FR: <u>04</u>	<u>X</u>										
SA: <u>05</u>	<u>X</u>						<u>12.6</u>				
TOTAL:	<u>16.0</u>	<u>56.0</u>					<u>12.6</u>				

EMPLOYEE SIGNATURE:

R Beilke

SUPERVISOR SIGNATURE:

[Signature]

COMMENTS:

11-05-06 505. 8844 Avery salvage yard. Called in by 487

EMPL. NO. 6641- 02199 MO 11 DAY 05 YR 05 LAST NAME NOVAK INITIALS 24 SHIFT WORKED 1

EXCEPTION HOURS	
20. Reg. Day Off	.
21. Abs. w/o Pay	.
22. Vacation	.
23. Sick	.
24. Holiday	.
28. Comp Used	.
29. Funeral	.
41. Adjustment Used	.

TIME OFF REQUEST	
ACTIVITY:	
22 VACATION	
24 HOLIDAY	
28 COMP	
41 ADJUSTMENT	
53 TRAINING	

ACTIVITY	REG. HOURS	O/TIME ACT.HRS	ACCT#
40. Adjustment Earned	.	.	
42. Patrol	6.5		
43. Criminal Investigation	5.0	4.0	50
44. Transport (On-Duty)	.	.	Mi.
45. Misc. Assign-Type	1.0	.	
45. Misc. Assign-Type	.	.	
45. Misc. Assign-Type	.	.	
46. Headquarters Duty	2.0	.	
47. Jail	.	.	
48. Snowmobile	.	.	5213000
49. Accident Investigation	.	.	
52. Report Writing	1.0	.	
53. Training-Type	.	.	
53. Training-Type	.	.	
54. D.A./Court	.	.	
56. Process	.5	.	
61. Bailiff	.	.	
62. Water Safety	.	.	5214000
63. S.O.S.	.	.	
66. Worker's Comp	.	.	
68. Emerg. Management	.	.	
69. Photo Lab	.	.	
70. SCUBA	.	.	
71. Funded Grant/Prog.	.	.	
72. Court Call-In (2 Hr.)	.	.	
73. Court Call-In (4 Hr.)	.	.	
74. Holiday (4 Hr. Max.)	.	.	
75. Transport (Off-Duty)	.	.	Mi.
76. Military Leave	.	.	
78. Call-In (2 Hr.)	.	.	
79. Call-In (4 Hr.)	.	.	
80. Field Trng. Officer	.	.	1 Hr Max

DATE OF REQUEST MO. DA. YR.

APPROVED DENIED

Indicate days off requested by placing V = VACATION, H = HOLIDAY, C = COMP, S = SICK, T = TRAINING, A = ADJUSTMENT USED., A/E = ADJ EARNED on regular day off, in the correct date of month shown below. If regular days off occur immediately before, during, or immediately after any of the requested days off, so indicate by placing an X in the correct dates below.

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	Month Of:			

EMPLOYEE SIGNATURE *Regan Novak*

APPROVED BY *[Signature]*

Comments: #43 OT - 1 hr late from Avery Rd incident 1200-1600 hrs

MANITOWOC COUNTY EMPLOYEE WEEKLY TIME REPORT

SHIFT 8 EMP# 308

EMPLOYEE NAME: HASTRUP, J.P.

PAY PERIOD: From 10/30/05 to 11/05/05

JAIL TIME CARD

DAY DATE	47 REG.	22 VAC	23 SICK	24 HOL	28 COMP	OT & ST	OT @ 1.5	MISC OT	ACCOUNT NUMBER	SUPRVSR'S INITIALS
SU: <u>30</u>	<u>X</u>									
MN: <u>31</u>	<u>7.5</u>									
TU: <u>1</u>	<u>7.5</u>						<u>1.0</u>			<u>Jan</u>
WD: <u>2</u>	<u>7.5</u>						<u>1.5</u>			<u>Jan</u>
TH: <u>3</u>	<u>7.5</u>									
FR: <u>4</u>	<u>7.5</u>						<u>1.0</u>			<u>Jan</u>
SA: <u>5</u>	<u>X</u>						<u>2.0</u>			<u>Jan</u>
TOTAL:	<u>37.5</u>						<u>5.5</u>			

EMPLOYEE SIGNATURE: [Signature]

SUPERVISOR SIGNATURE: [Signature]

COMMENTS: 31 0800-1600 5 0830-1330-1530 ASSISTED 160 W/ SET UP AND
1 0800-1630 TRANSPORT OF GENERATOR AND LIGHTING TO HWY
2 0800-1700 147 INCIDENT
3 0800-1600
4 0800-1630

PAY PERIOD: From 10123105 to 1115105

DAY DATE	16 REG.	22 VAC	23 SICK	24 HOL	28 COMP	OT @ 5T	OT @ 1.5	MISC	MISC OT	ACCOUNT NUMBER	SUPRVS'R'S INITIALS
SU: <u>10-23</u>	<u>X</u>										
MON: <u>24</u>	<u>7.5</u>										
TU: <u>25</u>	<u>7.5</u>										
WD: <u>26</u>	<u>7.5</u>										
TH: <u>27</u>	<u>7.5</u>										
FR: <u>28</u>	<u>7.5</u>										
SA: <u>29</u>	<u>X</u>										
SU: <u>30</u>	<u>X</u>										
MON: <u>31</u>	<u>7.5</u>										
TU: <u>11-1</u>	<u>7.5</u>										
WD: <u>2</u>	<u>7.5</u>										
TH: <u>3</u>	<u>7.5</u>										
FR: <u>4</u>	<u>7.5</u>										
SA: <u>5</u>	<u>X</u>						<u>10.7</u>				
TOTAL:	<u>75.0</u>						<u>10.7</u>				

EMPLOYEE SIGNATURE: Ronald E Shimek

SUPERVISOR SIGNATURE: [Signature]

COMMENTS: 2005 1105 (1230-2312) Support for lights on 147/avey Rd

PAY PERIOD: From 10 23 05 to 11 05 05

DAY DATE	46 REG.	22 VAC	23 SICK	24 HOL	28 COMP	OT @ ST	OT @ 1.5	MISC	MISC OT	ACCOUNT NUMBER	SUPVSR'S INITIALS
SU: <u>10-23</u>	X										
MON: <u>24</u>	X										
TU: <u>25</u>	X										
WD: <u>26</u>	8										
TH: <u>27</u>	8										
FR: <u>28</u>	8										
SA: <u>29</u>	8						1				
SU: <u>30</u>	8										
MON: <u>31</u>	8										
TU: <u>01</u>	X										
WD: <u>02</u>	X										
TH: <u>03</u>	X						2.1				
FR: <u>04</u>	8										
SA: <u>05</u>	8						4.0				
TOTAL:	<u>64</u>						<u>7.1</u>				

EMPLOYEE SIGNATURE: [Signature]

SUPERVISOR SIGNATURE: [Signature]

COMMENTS: 10-29 Daylight Savings
11-03 Staff meeting
11-05 Security on Avery Rd

EMPL. NO. 6641- 0405 MO 11 DAY 05 YR 05 LAST NAME O'Connor INITIALS POA SHIFT WORKED 1

EXCEPTION HOURS	
20. Reg. Day Off	24. Holiday
21. Abs. w/o Pay	28. Comp Used
22. Vacation	29. Funeral
23. Sick	41. Adjustment Used

TIME OFF REQUEST	
ACTIVITY:	
22 VACATION	
24 HOLIDAY	
28 COMP	
41 ADJUSTMENT	
53 TRAINING	

ACTIVITY	REG. HOURS	O/TIME ACT.HRS	ACCT#
40. Adjustment Earned			
42. Patrol	1.5		
43. Criminal Investigation	1.5	4.6	TEA
44. Transport (On-Duty)			Mi.
45. Misc. Assign-Type <i>N</i>	2.0		
45. Misc. Assign-Type <i>A</i>	.5		
45. Misc. Assign-Type			
46. Headquarters Duty	1.0		
47. Jail			
48. Snowmobile			5213000
49. Accident Investigation			
52. Report Writing	1.5		
53. Training-Type			
53. Training-Type			
54. D.A./Court			
56. Process			
61. Bailiff			
62. Water Safety			5214000
63. S.O.S.			
66. Worker's Comp			
68. Emerg. Management			
69. Photo Lab			
70. SCUBA			
71. Funded Grant/Prog.			
72. Court Call-In (2 Hr.)			
73. Court Call-In (4 Hr.)			
74. Holiday (4 Hr. Max.)			
75. Transport (Off-Duty)			Mi.
76. Military Leave			
78. Call-In (2 Hr.)			
79. Call-In (4 Hr.)			
80. Field Trng. Officer			1 Hr Max

DATE OF REQUEST MO. DA. YR.

APPROVED DENIED

Indicate days off requested by placing V = VACATION, H = HOLIDAY, C = COMP, S = SICK, T = TRAINING, A = ADJUSTMENT USED, A/E = ADJ EARNED on regular day off, in the correct date of month shown below. If regular days off occur immediately before, during, or immediately after any of the requested days off, so indicate by placing an X in the correct dates below.

1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	Month Of:			

EMPLOYEE SIGNATURE *[Signature]*

APPROVED BY *[Signature]*

Comments: OT - 505-8844