

# Elko County Overtime Hours & Description

Name \_\_\_\_\_

DAY	DATE	HOURS O/T	REASON
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

TOTAL \_\_\_\_\_ Dept. Head Signature \_\_\_\_\_

Employee Signature \_\_\_\_\_

