

Select Comp or Overtime: _____

Lucas County Commissioners



Name: _____

Pay Period: _____

Enter Time as h:mm tt (tt = am / pm)

Date	Hours Worked		Hours
	From	To	
Total Hours			

Employee Signature: _____

Supervisor Signature: _____

Please cut along dotted line

Employee Copy

Employee Copy

Select Comp or Overtime: _____

Lucas County Commissioners



Name: _____

Pay Period: _____

Date	Hours Worked		Hours
	From	To	
Total Hours			

Employee Signature: _____

Supervisor Signature: _____

Employee

Copy