OVERT	IME AUTHOR	RIZATIO	N REPO	RT			
DIVISION:		DATE	WORKE	D:	08/23/20	08/23/2020	
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	TIME IN	TIME OUT	TOTAL O.T. HOURS		
						9.5	
*							
					, .		
REASON FOR OVERTIME	-				TO REPLA	CE:	
Dignitary Detail					FOR REAS		
201-1013120-50200					SICK	NE)	
					CIVIL LEA		
					ANNUAL L OTHER ✓		
					OTTIER E	,	
27/10/- 600	1 17						
AUTHORIZED BY: Jord Alwern			· An	2.0	DATE:		
SUBMITTED BY:	APPR	OVED:				MGR.	

OVERTI	ME AUTHOR	RIZATIO	NREPO	RT		
DIVISION:		DATE	WORKE	D: Se	ptember 2	25, 2020
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	
		1,				4 hrs
	×	8				
REASON FOR OVERTIME					TO REPLA	CE:
KENOON ON OVERTIME					FOR REAS	
4 hrs POT					(CHECK O	NE)
Security detail at MP residence					CIVIL LEA	
					ANNUAL L	
Account: 201					OTTLER	•
AUTHORIZED BY: SAFZ #IIV	TITLE: Sct.	×			DATE:	,
SUBMITTED E	-	OVED:	1/1/2		DATE.	MGR.

OV	ERTIME AUTHOR	RIZATIO	N REPO	RT		
DIVISION: DATE WORKED: Se					ptember 04, 2020	
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T HOURS
						2.5 hrs
		-				
		-				
DE A CONTENTINE					TO REPLA	II CE:
REASON FOR OVERTIME	0.51 DOT				FOR REASON OF:	
Dignitary detail at MP 42	, 2.5 hrs POT				(CHECK ONE)	
	CARRY OUE	0			SICK	\r. \[\]
	(CARRY OVE	(4)			CIVIL LEA	LEAVE
Pay Code: 201					OTHER [
AUTHORIZED BY: Set The	TITLE: Sol,				DATE:	
LSUBMITTED BY:	\PPR	OVED:	11	M		MGR.

OVERT	IME AUTHOR	RIZATIO	NREPO	RT		
DIVISION:		DATE	WORKE	D: Se	ptember 1	10, 2020
NAME OF EMPLOYEES	CLASS TITLE	EMP. NG.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
						12 hrs
			u u			,
					× :	
	,					
REASON FOR OVERTIME	*				TO REPLA	CE:
Secuirty/ Dignitary detail @ MF	residence.				FOR REASON OF:	
	,				SICK	NE)
CODE: 201					CIVIL LEAVE	
					ANNUAL L	
					O THERE	-
AUTHORIZED BY S. J. J. J. J. W.	TITLE: SA				DATE:	
SUBMITTEDIBY	APPRO	OVED:			10,112.	MGR.

OVERTI	ME AUTHOR	RIZATIO	NREPO	RT		
DIVISION:		DATE	WORKE	D: Se	eptember 1	2, 2020
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
						12 hrs
	4	*				
REASON FOR OVERTIME					TO REPLA	CE:
Secuirty/ Dignitary detail @ MP	residence,				FOR REASON OF: (CHECK ONE)	
					SICK 🗌	
CODE: 201					CIVIL LEAVE ANNUAL LEAVE	
					OTHER [
AUTHORIZED BYN GUAL LIN	TITI F. Set	4			DATE:	
SUBMITTED BY:	APPRO	OVED:				MGR.

COL FORM #208 (R/11/73)	DEPA	RTMENT OF:	POLICE			
OVE	RTIME AUTHO	RIZATIO	N REPO	RT		
DIVISION:		DATE	WORKE	D:	9/16/20	
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE		TIME OUT	TOTAL O.T. HOURS
						12
REASON FOR OVERTIME					TO REPLACE:	
Mayor's Guillory Security (Reside	ence)				FOR REASON OF:	
Pay Code 201, Acct. Unit 101312	20, G/L Acct. 54041				(CHECK ONE)	
					CIVIL LEAN	
å					OTHER _	
1 / /						
AUTHORIZED BY: A LIME	HYDRITLE: L.J.		1 /		DATE: 9	-18-20
SUBMITTED BY:	APPF	ROVED L	J. 12	PH	140	MGR.
	•		£.	9		

OVERT	IME AUTHOR	RIZATIO	NREPO	RT		,
DIVISION:		DATE	WORKE	D:	August 23,	2020
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
						9 hrs
х.						
	*					
REASON FOR OVERTIME					TO REPLA	CE:
Dignitary detail assignment @	MP 42				FOR REASON OF: (CHECK ONE)	
	(120)				SICK 🗌	
Pay Code: 201 SHRS	CON CONTRACTOR				CIVIL LEAVE ANNUAL LEAVE	
DayCod 2 101-4 Hrs (Cr)						
A (C)						
AUTHORIZED BY: SAY Ken #111	TITLE: Set	ί,		2 0	DATE:	
SUBMITTEDIBY	PPR	OVED:		[[]]		MGR.

OV	ERTIME AUTHOR	RIZATIO	N REPO	RT		
DIVISION:		DATE	WORKE	D:	August 22	, 2020
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
						14 hrs
		-				
*						
		-				
REASON FOR OVERTIME					TO REPLA	CE:
(CARRY OVER)	Dignitary Detail a	ssignmen	t @ MP 42	2	FOR REASON OF: (CHECK ONE)	
					SICK 🗌	_
Pay Code: 201					CIVIL LEAVE ANNUAL LEAVE	
	A CONTRACTOR OF THE CONTRACTOR				OTHER [
AUTHORIZED BY: SHE	118 TITLE: S	54.			DATE:	
LEUBMITHED BY	\PPR	OVED:	47/	W		MGR.

LCG FORM # 208	OVERTIME AUTHOR	RIZATION	REPORT			
DIVISION:		DATE WOR	Λ	16/20	2	
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
•		1 1 1			1	12
						-
REASON FOR OVERTIME					TO REPLA	CE
PAY CODE	701				FOR REAS	
	US UNIT	101312	20		(CHECK O SICK (CIVIL LEA)
		4041			ANNUAL L	EAVE ()
					OTHER (.)
0.400						, ,
AUTHORIZED BY:	12/8/ TITLE: 5	67	0 0		DATE: 9	18/20
SUBMITTED BY:	APPROV	ED / 1 7 /	wolder &	1147		MGR

 $\mathcal{Z}^{\mathcal{P}}$

LPD #97 (R9/15)

DEPARTMENT OF: LAFAYETTE POLICE DEPARTMENT

OVERT	IME AUTHOR	RIZATIO	N REPO	RT		
DIVISION:		DATE WORKED:				20
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
	e					12
	7.0					
					× .	
REASON FOR OVERTIME					TO REPLA	CE:
Protest Duties					FOR REASON OF: (CHECK ONE)	
Paycode: 201 - 1013120- 5404	11				SICK 🗆	<i>(</i> − □
					CIVIL LEA'	TO 100 AND 100
					OTHER []
	2-1					
AUTHORIZED BY:	TITLE: S57	_			DATE	y/w
SUBMITTED BY:	APPRO	OVFD.	AT I			

LCG FORM # 208	DEPARTM	ENT OF P	lice			
OVERT	IME AUTHOR					
DIVISION:		DATE WOR	KED: 9/	11/20		
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
*	3				1.	Bhrs
		T 1			Γ Τ	
REASON FOR OVERTIME Mayor	President	T detail			TO REPLA	CE
201			`		FOR REAS	
Acct. Unit 101312 6/6 Acct. # 5404	- O				(CHECK O SICK (CIVIL LEAN)
G/L Acc1.# 5404	(ANNUAL L OTHER (EAVE ()
	,	,				
AUTHORIZED BY!) OSOLO red AP 191	TITLE: Ser	geant	1	\	DATE: 9	15-20
SUBMITTED BY:	APPROVE	ED At.	MUC	7#741	0	MGR.

LCG FORM # 208	DEPARTM	IENT OF	Police			
OVE	RTIME AUTHOR		REPORT			
DIVISION:		DATE WOR	KED:	9/08/2	iO.	
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
				1 1		12
		+	 			
		-	-	-		-
REASON FOR OVERTIME	or Guillery	Detai	1		TO REPLA	II.
	54041				FOR REAS (CHECK C SICK (CIVIL LEA ANNUAL L OTHER	NE) () VE () .EAVE ()
				//		
AUTHORIZED BY: SHOUDO	TITLE: SEA		, /	1/0	DATE: 9	14/20

LCG FORM # 208	DEPARTM	ENT OF P	olice	٠		
OVER	TIME AUTHOR	RIZATION F	REPORT			
DIVISION:		DATE WOR	KED:	9191	20	
NAME OF EMPLOYEES ,	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T
		1				12
S. 21 4 - 4 - 2 815 0100 T	T .	1 ~			, 7	
REASON FOR OVERTIME					TO REPLA	CE
Security for	May	DY			FOR REAS (CHECK O SICK (CIVIL LEAV ANNUAL L OTHER (NE)) /E () EAVE ()

LCG FORM # 208	DEPARTM	MENT OF	20			
OVEF	RTIME AUTHOR			1 1		
DIVISION:		DATE WOR	KED:	16/2	Ü	
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
						15
REASON FOR OVERTIME MANAY'S	detail				TO REPLA	CE
Pax code 201					FOR REAS	
Accounting Unit	101312	0			(CHECK O SICK ()
(a) A compa	E110111	0			CIVIL LEAN	EAVE ()
VIL ACCOUNT	5 10 11				OTHER ()
AUTHORIZED BY:	TITLE:				DATE:	
SUBMITTED BY:	APPROV	ED L+Cint	Mart 352	(DAIE.	

LCG FORM # 208	DEPARTMI OVERTIME AUTHOR	IZATION F	REPORT			
DIVISION:		DATE WOR	KED: 9-5	5-20		
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T
		_				12
						- 1
REASON FOR OVERTIME May	on Guillon Datail				TO REPLA	CE
	wy granery greatus				FOR REAS (CHECK O SICK (CIVIL LEAN ANNUAL L OTHER (NE)) /E () EAVE ()
AUTHORIZED BY:	TITLE:				DATE:	

LCG FORM # 208		MENT OF PO!				
OVER	TIME AUTHOR	RIZATION	REPORT		11	
DIVISION:		DATE WOR	KED: 9	2/30		
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T.
				-		12
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		+				
11	M 1 -,		Ц	Ц	TO REPLA	CE
REASON FOR OVERTIME Mayors	Metal/					
					FOR REAS (CHECK O	
20//10/3120/5	54041				SICK ()
	,,,,				CIVIL LEAV	
					OTHER (
	,					
		ef			-	
AUTHORIZED BY: / / - 0	TITLE: 2	1-	1 1221		DATE:	
SUBMITTED BY:	APPROV	ED Lthy 1	hors 34			MGF

DEPARTMENT OF POINT OVERTIME AUTHORIZATION REPORT LCG FORM # 208 DIVISION: Poton) DATE WORKED: 9 HOURLY RATE TOTAL O.T. NAME OF EMPLOYEES **CLASS TITLE** EMP. NO. TIME IN TIME OUT HOURS REASON FOR OVERTIME Maco TO REPLACE FOR REASON OF: (CHECK ONE) SICK () CIVIL LEAVE () ANNUAL LEAVE () OTHER ()

LCG FORM # 208	RTIME AUTHOR	RIZATION	REPORT			
DIVISION:		DATE WOR		104/3	2c	
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T
		-		<u>'</u>		12hrs
		-				
			-			
REASON FOR OVERTIME Securi	In Defail	Mayor	's Reside	ence.	TO REPLA	CE
PAY CODE A	13120	GL 540"			FOR REAS (CHECK O SICK (NE)
	7100				CIVIL LEAV ANNUAL L OTHER (EAVE ()
AUTHORIZED BY:	TITLE:				DATE:	

LPD #	#97 (R	9/15)

DEPARTMENT OF: LAFAYETTE POLICE DEPARTMENT

OVERTI	ME AUTHOR	RIZATIO	N REPO	RT		
DIVISION:		DATE	WORKE	D: ()	TO REPLACE: FOR REASON OF: (CHECK ONE) SICK COUNTY CIVIL LEAVE COUNTY C	
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
)		6
				11-12		
					TO DEDIA	05:
REASON FOR OVERTIME						
Dignitary Detail Carryover					(CHECK ONE)	
AUTHORIZED BY:	TITLE: SS	+			DATE:	
SUBMITTED BY:	APPRO	OVED: C	4/ Z		DAIL.	MGR.

COL FORM #208 (R/27/08)	DEPA	RTMENT OF:	POLIC	E		**
OVERTIME	AUTHO	PIZA	OIT	N RE	EPOF	RT
DIVISION:		DATE	WORKE	D: 08/23	3/2020	
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
						9
,						
REASON FOR OVERTIME:					TO REPLAC	Έ:
Mayor President Security Detail.					FOR REASI (CHECK OF SICK CIVIL-L ANNUAL OTHER	NE) .EAVE LEAVE
AUTHORIZED BY: LA Concect	TITLE: U.		00	e de la constante de la consta	DATE:	-
SUBMITTED BY:	APPR	OVED S	11/2	MA		MGR.

Serie .

LCG FORM # 208	DEPARTME	ENT OF	foll	te		
0'	VERTIME AUTHORI	ZATION F	REPORT	1	/	
DIVISION:		DATE WOR	KED:	10/13	62020)
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TÎME IN	TIME OUT	TOTAL O.T. HOURS
_						12
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REASON FOR OVERTIME					TO REPLA	CE
					FOR REAS	
Meye	or's Defail		100		(CHECK O SICK (CIVIL LEA)
Way Code 7	#201		for the		ANNUAL L OTHER (EAVE ()
Act Unit #	10/3/20		4.		OTHER (,
G/L Acct;	454041	12"		~	>	
ALITHORIZED BY:	999 TITLE S.T	. 1	//	///	DATE:	

SUBMITTED BY:

1	DD	440.7	/DO	145	١

DEPARTMENT OF: LAFAYETTE POLICE DEPARTMENT

	OVERTIM	E AUTHOR	RIZATIO	NREPO	RT		
DIVISION:			DATE	WORKE	D:/0 -/	yrs	
NAME OF EMPLOYEES		CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
					, ,		12
REASON FOR OVERTIM	ИΕ					TO REPLA	CE:
Mayar's	House D		-54041			FOR REAS (CHECK OI SICK COUNTY LEA ANNUAL LOTHER COUNTY LEA	VE LEAVE
AUTHORIZED BY:	#055 T	ITLE: Sof .		7 /	1	DATE:	
SUBMITTED BY		APPRO	VED:	1/	W.	6 685	MGR.

DEPARTMENT OF LCG FORM # 208 OVERTIME AUTHORIZATION' REPORT DATE WORKED: DIVISION: HOURLY TOTAL O.T. TIME OUT EMP. NO. NAME OF EMPLOYEES **CLASS TITLE** RATE TIME IN HOURS TO REPLACE REASON FOR OVERTIME FOR REASON OF: (CHECK ONE) SICK () CIVIL LEAVE () ANNUAL LEAVE () OTHER () AUTHORIZED BY: TITLE: DATE:

MGR.

SUBMITTED BY

FORM # 208	DEPARTIV	IENT OF				
	OVERTIME AUTHOR	RIZATION I	REPORT			
VISION:		DATE WOR	KED:	Octob	sex 5.	2020
ME OF EMPLOYEES	CI ASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
		'				12
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		+		H		
				H		
			Ш	<u> </u>	TO REPLA	05
ASON FOR OVERTIME	Lyon SECURIT	y Det	ail		IO REPLA	.CE
		. 50			FOR REAS	
Act of the second	,	A				()
(RO1, Acct 101312	0 GL 34041				CIVIL LEAV	
					OTHER (
	W .					
THORIZED BY:	TITLE:			A	DATE: /5/	15/2
BMITTED BY	APPROV	ED CANY	all color	1488		MGR.
#01, Acc+ 101312	Resider	ED CAN	of the	- 11 ASV	(CHECK O SICK (CIVIL LEAY ANNUAL L OTHER (VE (EAVE

DEPARTMENT OF Police LCG FORM # 208 OVERTIME AUTHORIZATION REPORT DATE WORKED: 10/8/20 DIVISION: HOURLY TOTAL O.T. NAME OF EMPLOYETS RATE **CLASS TITLE** EMP. NO. TIME IN TIME OUT HOURS TO REPLACE REASON FOR OVERTIME FOR REASON OF: (CHECK ONE) SICK () 1013120 54041 CIVIL LEAVE () ANNUAL LEAVE () OTHER () AUTHORIZED BY: ST COZOSZ TITLE: APPROVED SUBMITTED BY:

LCG FORM # 208	DEPAI	RTMENT OF	LPD			
	OVERTIME AUTH		REPORT			
DIVISION:		DATE WOR	RKED: (0	112/2	0	
NAME OF EMPLOYEES	CLASS TITL	.E EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
				-	į	16
						6
						12
REASON FOR OVERTIME	Mayor's	House			TO REPLA	CE
201	/	120	540	41	FOR REAS (CHECK O SICK (CIVIL LEAV ANNUAL L OTHER (NE)) /E () EAVE ()
AUTHORIZED BY:	BALL STITLE:	567	0 0		DATE: /	3/14/20
SUBMITTED BY:	APPE	ROVED 42K	18451	()		MGR.

DEPARTMENT OF Volice LCG FORM # 208 OVERTIME AUTHORIZATION REPORT DATE WORKED: 10/14/26 DIVISION: HOURLY TOTAL O.T. NAME OF EMPLOYEES **CLASS TITLE** EMP. NO. RATE TIME IN TIME OUT HOURS 1.2 hrs. REASON FOR OVERTIME Magais Sewit TO REPLACE FOR REASON OF: (CHECK ONE) SICK () CIVIL LEAVE () 1013120 ANNUAL LEAVE () OTHER () AUTHORIZED BY: U. Dovid 43 DATE: 10 14.2 TITLE: APPROVED LA SUBMITTED BY:

LCG FORM # 208	DEPARTM	IENT OF A	Plice			
	OVERTIME AUTHOR		REPORT	1	1	
DIVISION:	7	DATE WOR	RKED:	0/01	1202	5
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
		-		_		12
		-				
DEACON FOR OVERTIME					TO REPLA	CE
REASON FOR OVERTIME	yor's Defail	4 54	641		FOR REAS (CHECK O SICK (CIVIL LEAV ANNUAL L OTHER (NE)) /E () EAVE ()
AUTHORIZED BY	COSS TITLE: ST	. 1			DATE:	
SUBMITTED BY:	APPROVI	ED Les	2 12	4	85	MGR.

- 907 CS .

LCG FORM # 208	DEPARTM	IENT OF	0/100			
	OVERTIME AUTHOR	IZATION	REPORT	/	/	
DIVISION:		DATE WOR	KED: /C	0/06	1200	0
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
						12
		1				
					TO REPLA	.CE
REASON FOR OVERTIME						
Je Ac	1401's Defai #201 cff 1013120		5404/		FOR REAS (CHECK O SICK (CIVIL LEA' ANNUAL L OTHER (ONE) () VE () LEAVE ()
AUTHORIZEDBY	OSS TITLE: Set	-	1 -/	γ	DATE:	
SUBMITTED BY:	APPROVI	ED S	6// 4	Soly.	68.9	MGR.

LCG FORM # 208	DEPARTM	IENT OF	Plice				
OVER	TIME AUTHOR	RIZATION	REPORT	/	/		
DIVISION:	DIVISION: DATE WORKED: 10 / //						
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS	
		_				12	
					TO REPLACE	CF.	
REASON FOR OVERTIME	Defail (Civil L	(eave)		FOR REAS (CHECK O SICK (CIVIL LEAV ANNUAL LI OTHER (ON OF: NE)) /E () EAVE ()	
AUTHORIZED BY:	TITLE: APPROV	. / ED/ C/O	4.6	In	DATE:	MGF	

DEPARTMENT OF HOLICE LCG FORM # 208 OVERTIME AUTHORIZATION REPORT DATE WORKED: DIVISION: HOURLY TOTAL O.T. NAME OF EMPLOYEES **CLASS TITLE** EMP. NO. RATE TIME IN TIME OUT HOURS TO REPLACE REASON FOR OVERTIME FOR REASON OF: (CHECK ONE) SICK () CIVIL LEAVE () ANNUAL LEAVE () OTHER () TITLE: Sept 1 206 AUTHORIZED BY: DATE: ·

APPROVED

MGR.

SUBMITTED B'

LCG FORM # 208	DEPARTI	MENT OF	dice			
	OVERTIME AUTHOR	RIZATION I	REPORT	/	_	
DIVISION:		DATE WOR	KED:	19/25	12020	;
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
				<u> </u>		12
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		+	-			
		-	H	H	-	
REASON FOR OVERTIME					TO REPLA	CE
					FOR REAS	SON OF:
Nove	ele Polisi				(CHECK O	NE)
- (uy)	1 1 4 201				CIVIL LEAV	
Pay	1 Code # 201				OTHER (
Acc	H 10/3/20					
6/6	1 4 54041					
AUTHORIZED BY:	204 TITLE: Sep	1.		(/	DATE:	
SUBMITTED BY:	APPROV	ED S	- pul	of (5)	>	MGR

1927-20

DEPARTMENT OF LCG FORM # 208 OVERTIME AUTHORIZATION REPORT DATE WORKED: DIVISION: HOURLY TOTAL O.T. RATE NAME OF EMPLOYEES **CLASS TITLE** EMP. NO. TIME IN TIME OUT HOURS TO REPLACE REASON FOR OVERTIME FOR REASON OF: (CHECK ONE) SICK () CIVIL LEAVE () ANNUAL LEAVE () OTHER () AUTHORIZED BY: DATE: APPROVED SUBMITTED BY: MGR.

LCG FORM # 208	DEPARTM	ENT OF PO	lice			
OVE	RTIME AUTHOR		REPORT	, ,		
DIVISION:		DATE WOF	KED: 09	111/200		
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T.
		_				12
ia)		1		70.0551	
REASON FOR OVERTIME	Guillar Y'S heside	the Secu	ity leta	<i>i</i> /	TO REPLA	CE
Pay 201 Aux 1013120	•		•		FOR REAS (CHECK O SICK (CIVIL LEAV ANNUAL L OTHER (NE)) /E () EAVE ()
GL 540 41	46 TITLE: Sq		10			-28-201
AUTHORIZED BY: // 974	46 TITLE: 397		Man	Den	DATE:	MGE

LCG FORM # 208	DEPARTM	ENT OF PO	lice			
OVEF	TIME AUTHOR	IZATION I	REPORT	12.12.1		
DIVISION:		DATE WOR	KED: 09	30/202	0	
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
						12
	+					
					-	
90 /					TO REPLA	<u></u>
REASON FOR OVERTIME 1990 60	illory's hesidence	e Security	Defail		- TO REPLA	JE
0					FOR REAS	
Pay - 201					(CHECK O)
Ade T -1013120					ANNUAL L	EAVE ()
62-54041					OTHER ()
AUTHORIZED BY: 597., 9	146 TITLE: 6	S95.	1//.	1	DATE: 9	-28-200
SUBMITTED BY:	APPROVI	ED CAPT.	Slan	Nan		MGR.

Write .

DEPARTMENT OF POLICE LCG FORM # 208 OVERTIME AUTHORIZATION REPORT DATE WORKED: 9/16/30 DIVISION: HOURLY TOTAL O.T. RATE HOURS NAME OF EMPLOYEES **CLASS TITLE** EMP. NO. TIME IN TIME OUT 12 TO REPLACE REASON FOR OVERTIME __ FOR REASON OF: (CHECK ONE) SICK () CIVIL LEAVE () ANNUAL LEAVE () OTHER () AUTHORIZED BY: DATE: APPROVED SUBMITTED BY: MGR.

LCG FORM # 208	DEPARTM	MENT OF P	lice			
OVEF	RTIME AUTHOR		REPORT			
DIVISION:		DATE WOR	KED: 9-	18-ZU		
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
					1	15
			-			
			-	-		
						-
REASON FOR OVERTIME Mayor	President	Securit	, Deto	151.	TO REPLA	CE
					FOR REAS (CHECK O SICK (CIVIL LEAV ANNUAL L OTHER (NE)) /E () EAVE ()
0.77		\sim	14-2-		,	
AUTHORIZED BY: Softendgullary 1	TITLE:	Sergear	A	321	DATE: 9/	27/20
SUBMITTED BY:	APPROV	ED 46,1	Mount.	579		MGR.

LCG FORM # 208	DEPARTM	ENT OF	Slice			
	OVERTIME AUTHOR	IZATION	REPORT			
DIVISION:		DATE WOR	KED:	24/20		
NAME OF EMPLOYEES	CLASS TITLE	EMP. NC.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T HOURS
				Ц		12
		 				1
		-	H			-
	Mayor's House	o Noto	•()		TO REPLA	CE
REASON FOR OVERTIME	Trayer > Fruid	e hera				
					FOR REAS (CHECK O	
					SICK (
					ANNUAL L	EAVE ()
					OTHER ()
0 = 3						
AUTHORIZED BY:	TITLE: Sar			-/	DATE:	
SUBMITTED BY:	APPROVE	D Lthi	March	31	DAIL.	MGR
GODINIT TED DT:	ALLIOVE	-100	Vall 19			WIGH

Service .

LCG FORM # 208	DEPARTM	ENT OF V	DIVCE				
OV	ERTIME AUTHOR	IZATION I	REPORT				
DIVISION:	DATE WORKED: 10 2 9000						
NAME OF EMPLOYEES	CLASSTITLE	EMP. NC.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS	
						12	
		<u> </u>		1		1	
		-		-		-	
					-	-	
REASON FOR OVERTIME	VOLIDY'S how	10 Deta	ril		TO REPLA	CE	
					FOR REAS (CHECK O SICK (CIVIL LEAV ANNUAL L OTHER (NE)) /E () EAVE ()	
AUTHORIZED BY:	TITLE: Les				DATE:		
SUBMITTED BY:	APPROVE	D Cthy	1 gylanst	-30/		MGR.	

927 24

LCG FORM # 208		ENT OF (
	OVERTIME AUTHOR					
DIVISION:		DATE WOF	RKED: 0	1/29/	20	
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS
				_	_	12 hrs
		1		H		
		+		H		+
		-		 		
REASON FOR OVERTIME	ancis Secuit	Pode	:/		TO REPLA	CE
201	101 312		540	4/	FOR REAS (CHECK O SICK (CIVIL LEA' ANNUAL L OTHER (NE)) /E () EAVE ()
AUTHORIZED BY: DOV'Q	TITLE: Lt.				DATE 9	95,08
SUBMITTED BY:	APPROVE	D C/)	MUL	1		MGR.

LCG FORM # 208	DEPART	MENT OF P	buce					
	OVERTIME AUTHO	RIZATION	REPORT					
DIVISION:	DATE WORKED: 9/10/20							
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS		
J . L		-		-		11		
REASON FOR OVERTIME					TO REPLA	CE		
Protest	ts / Funeral				FOR REAS (CHECK O SICK (CIVIL LEA' ANNUAL L OTHER (NE) VE () EAVE ()		
		\bigcirc						
AUTHORIZED BY: Q1. Bridge	Ham (B)	Serge	ant		DATE: 9/	16/20		
SUBMITTED BY:	APPRO	/ED /+63	Mant 354			MGR.		

LCG FORM # 208	DEPARTM	ENT OF Po	lice				
OVE	RTIME AUTHOR						
DIVISION:	DATE WORKED: 9-114/20						
NAME OF EMPLOYEES	CLASS TITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS	
	•	•		_		12	
REASON FOR OVERTIME May Pay Code ZO1	as Resider	nce De	tail		TO REPLA	CE	
Pay Code ZOI	1013120	5404/	/		FOR REAS (CHECK O SICK (CIVIL LEAV ANNUAL LI OTHER (NE)) /E () EAVE ()	
AUTHORIZED BY: 59-11-198	TITLE: 560		, /		DATE:		
SUBMITTED BY:	APPROVE	D CANT	168	1		MGR.	

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LCG FORM # 208	DEPARTM	ENT OF PO	lice				
OVER	TIME AUTHOR		REPORT				
DIVISION:	DATE WORKED: 9/7/20						
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS	
						12	
					×		
REASON FOR OVERTIME MOLYON'S House Detail					TO REPLACE		
(LABOL DAY)				FOR REASON OF:			
201					(CHECK ONE) SICK ()		
ANNUAL LEAVE (EAVE ()	
54041		it.			OTHER ()	
AUTHORIZED BY: SST 18 SUC 411	/ TITLE: 5	51	11	\wedge	DATE: 9-	15-20	
SUBMITTED BY	APPROVI	ED CADT	- Alla	i Ne		MGR.	

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LCG FORM # 208	DEPARTM	MENT OF PO	olice				
OVER1	TIME AUTHOR	RIZATION I	REPORT				
DIVISION:							
NAME OF EMPLOYEES	CLASSTITLE	EMP. NO.	HOURLY RATE	TIME IN	TIME OUT	TOTAL O.T. HOURS	
!						12	
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			-	-	-		
			<u> </u>				
REASON FOR OVERTIME MOUNTS	House	Detail			TO REPLA	CE	
	, , , , ,				FOR REAS	ON OF:	
					(CHECK ONE) SICK () CIVIL LEAVE ()		
201							
1012150					ANNUAL LI OTHER (
54041							
AUTHORIZED BY: Sot MISINGHUI	TITLE: S	st	/	1)	DATE: 9-	15-20	
SUBMITTED BY:	APPROV	ED A	AT X	Vai 1	Vall	MGR.	