

SECTION III continued

14. DATE OF SERVICE (MM/DD/YY)	15. OFFICER NAME	16. SERVICE IDENTIFIER (Customs Entry No., Air Waybill No., Bill of Lading No. (Ocean, Truck, Rail), Container No., Flight No., Aircraft Tail No., and other identifier relating to the service code)	17. WORK TIME (Military Hours) A minimum 2-hr call back time may be applied.		18. O/T HOURS Record hours and minutes in 15 minute increments, and round to the nearest 15-minute increment.		
			IN	OUT	CTT	REG	SUN
(g)							
		DESCRIPTION <input type="checkbox"/> 2-hr Min O/T					
(h)							
		DESCRIPTION <input type="checkbox"/> 2-hr Min O/T					
(i)							
		DESCRIPTION <input type="checkbox"/> 2-hr Min O/T					
(j)							
		DESCRIPTION <input type="checkbox"/> 2-hr Min O/T					
(k)							
		DESCRIPTION <input type="checkbox"/> 2-hr Min O/T					
(l)							
		DESCRIPTION <input type="checkbox"/> 2-hr Min O/T					
(m)							
		DESCRIPTION <input type="checkbox"/> 2-hr Min O/T					
(n)							
		DESCRIPTION <input type="checkbox"/> 2-hr Min O/T					
(o)							
		DESCRIPTION <input type="checkbox"/> 2-hr Min O/T					
O/T HOURS TOTAL							

SECTION IV – CERTIFICATION

I certify that the services recorded above were performed.

19. OFFICER NAME AND TITLE	20. SIGNATURE	21. TELEPHONE NO.	22. DATE
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SECTION V – PAYMENT INFORMATION

23. AMOUNT PER O/T CATEGORY	a. CTT O/T (Items 13a X 18 CTT Total)	b. REGULAR O/T (Items 13b X 18 REG Total)	c. SUNDAY O/T (Items 13c X 18 SUN Total)
	\$	\$	\$

24. TOTAL AMOUNT OF REIMBURSABLE OVERTIME (Total \$ amount of Items 23a through 23c) \$

25. METHOD OF PAYMENT

BILLING CREDIT CARD CASH ON DELIVERY (COD) (Complete Items 26, 27)

26. CHECK OR MONEY ORDER NO.	27. ACCOUNTING CODE
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28. REMARKS