

**EMPLOYEES' RETIREMENT SYSTEM OF BALTIMORE
REQUEST FOR OVERTIME APPROVAL**

WEEK BEGINNING _____ WEEK ENDING _____

REQUEST THIS WEEK IN: MONEY _____ COMP TIME _____

Day	Date	AM/PM	FROM	TO	TOTALS	MEAL MONEY Circle Y or N	REASON FOR OT
Saturday						Yes No	
Sunday						Yes No	
Monday						Yes No	
Tuesday						Yes No	
Wednesday						Yes No	
Thursday						Yes No	
Friday						Yes No	

TOTAL HOURS OVERTIME WORKED: _____

EMPLOYEE SIGNATURE: _____ Date: _____

SUPERVISOR APPROVAL: _____

DEPARTMENT HEAD: APPROVAL: _____ DISAPPROVAL: _____ DATE: _____