

DEFENSE CIVILIAN PAY SYSTEM  
TIME AND LABOR REPORT  
FORMAT 1

EMPLOYEE ID		BLK/GRP	ACT UIC	DIST	EMPLOYEE NAME										PLT ROT	PERIOD ENDING	SEQ NO.
STD JON												HRS OF WORK					
//////	AWS	SUN	MON	TUE	WED	THR	FRI	SAT	SUN	MON	TUE	WED	THR	FRI	SAT		
TOUR																	
TYP/SFT	////																
GRADED ND																	
WK	DAY	TYPE HOUR	HOURS	JOB ORDER NUMBER						ENV HAZ	LST HR	TMP SFT	NIGHT DIFF	START TIME		INIT	
REG	OT	COMP	HOL	SUN	2ND	3RD	ND	E/H	LV	NP/LV							

RG - REGULAR HOURS (GS)  
RF - REGULAR, 1ST SHIFT (WG)  
RS - REGULAR, 2ND SHIFT (WG)  
RT - REGULAR, 3RD SHIFT (WG)

HG - HOLIDAY WORKED (GS)  
HF - HOLIDAY WORKED, 1ST SHIFT (WG)  
HS - HOLIDAY WORKED, 2ND SHIFT (WG)  
HT - HOLIDAY WORKED 3RD SHIFT (WG)

SG - SUNDAY WORK (GS)  
SF - SUNDAY WORK, 1ST SHIFT (WG)  
SS - SUNDAY WORK, 2ND SHIFT (WG)  
ST - SUNDAY WORK, 3RD SHIFT (WG)

LA - ANNUAL LEAVE  
LB - ADVANCED ANNUAL LEAVE  
LC - COURT LEAVE  
LG - ADVANCE SICK LEAVE  
LH - HOLIDAY LEAVE  
LM - MILITARY LEAVE  
LN - ADMIN LEAVE  
LS - SICK LEAVE  
LT - COP  
LU - DATE OF TRAUMATIC INJURY  
LY - TIME OFF AWARD

OV - OVERTIME - UNSCHEDULED  
OC - OVERTIME - CALL BACK

CE - COMP TIME EARNED  
CT - COMP TIME TAKEN  
CD - CREDIT HOURS EARNED  
CN - CREDIT HOURS TAKEN

KA - LWOP  
KB - SUSPENSION  
KC - AWOL  
KD - LWOP - OWCP

ALL HOURS REPORTED ARE CORRECT FOR THE REPORTING PERIOD.

ALL HOURS HAVE BEEN REVIEWED AND ARE CERTIFIED CORRECT FOR THE REPORTING PERIOD. ALL PREMIUM HOURS HAVE BEEN APPROVED AND WORKED ACCORDING TO THE APPROPRIATE LAWS AND REGULATIONS.

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SUPERVISOR/TIMEKEEPER'S SIGNATURE  
**FHT** FORM JUN 95 **37-X9 part 1-E** (DAO)  
THIS ELECTRONIC VERSION AUTHORIZED BY DOIM FORMS MANAGEMENT OFFICER

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CERTIFIER'S SIGNATURE