

# Tracy Unified School District Request for Cash Payment For Approved Overtime – Classified

Due to Financial Services by the 20<sup>th</sup> of each month

Payroll Pay Period: From Month \_\_\_\_\_/16/20\_\_\_\_ To Month \_\_\_\_\_/15/20\_\_\_\_

**Instructions:** Fill out separate overtime requests form for each type of service. Please check the type of service:

- Facility Use  
  Custodial  
  Maintenance  
  Grounds  
  Transportation  
  Food Svc  
  Security  
  Utility II/III  
 Warehouse  
  Clerical-Site/Dept.  
  Translator  
  Library Tech  
  Para Educator  
 Other \_\_\_\_\_ (Description)

Name of Employee \_\_\_\_\_  
Print Name

ID# \_\_\_\_\_

Employees Signature \_\_\_\_\_

Date \_\_\_\_\_

Supervisor Signature \_\_\_\_\_

Date \_\_\_\_\_

Date Overtime Worked Mo/Day/Year	Start Time and End Time AM/PM      AM/PM	Actual Number Of OT Hours Worked	Reason for Overtime/Extra Services Please be specific
Grand Total of Hours			

Select Account Code:

- |  |   |
|--|---|
| <input type="checkbox"/> Facility Use (Custodian OT ONLY)  | 01-0017-0-8100-5900-2206-806-9622       |
| <input type="checkbox"/> Site/Dept Events (Custodian/Utility)(Operation Dept. Use Only)              | 01-0000-0-1110-4200-2206-806-9602       |
| <input type="checkbox"/> School Events (Custodian/Utility/Security: Paid by site - Insert site code) | 01-0000-0-1110-8300-2206- _6-9031       |
| <input type="checkbox"/> Utility II/III (OT ONLY) (Operation Dept. Use Only)                         | 01-0000-0-1110-8300-2206-806-9031       |
| <input type="checkbox"/> Custodial (OT ONLY) (Operation Dept. Use Only)                              | 01-0000-0-1110-8200-2206-806-9602       |
| <input type="checkbox"/> Security and Alarm Calls (OT ONLY)  | 01-0000-0-1110-8300-2206-806-9031       |
| <input type="checkbox"/> Maintenance (OT ONLY)(Operation Dept. Use Only)                             | 01-8150-0-0000-8110-2206-806-9402       |
| <input type="checkbox"/> Grounds (OT ONLY) (Operation Dept. Use Only)                                | 01-8150-0-0000-8400-2206-806-9572       |
| <input type="checkbox"/> Transportation-Home to School (OT ONLY)                                     | 01-0723-0-1110-3600-2206-806-9702       |
| <input type="checkbox"/> Transportation-Special Education (OT ONLY)                                  | 01-0724-0-5001-3600-2206-806-9702       |
| <input type="checkbox"/> Food Service Workers (OT ONLY)  | 13-5310-0-0000-3700-2206-806-9802       |
| <input type="checkbox"/> Other Services (Site/Dept. Account for OT ONLY)                             | _____ -0- _____ - _____ - _____ - _____ |

Account code to be charged for services

Earnings:

Payroll Use Only

\_\_\_\_\_ Hrs.@ \_\_\_\_\_ \$ \_\_\_\_\_

Total Paid \_\_\_\_\_

\_\_\_\_\_ Hrs.@ \_\_\_\_\_ \$ \_\_\_\_\_

Date Paid \_\_\_\_\_