

REQUEST FOR AUTHORIZATION OF OVERTIME AND HOLIDAY WORK

TO: **Comptroller** 25X1A

FROM: **Chief, Finance Division** ALLOTMENT SYMBOL [REDACTED]

PAY PERIOD		ESTIMATED NUMBER	
BEGINNING	ENDING	HOURS	EMPLOYEES
30 April 1961	13 May 1961	8	1

JUSTIFICATION
 INDICATE, CONCISELY BUT ADEQUATELY, PURPOSE FOR WHICH OVERTIME IS TO BE USED, TYPE OF PERSONNEL INVOLVED (e.g., clerical, professional) AND REASON WORK CANNOT BE ACCOMPLISHED WITHIN 40 HOUR WEEK. (Do not include Operational Detail)

Per the request of Mr. [REDACTED] performed overtime work in connection with the [REDACTED]

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DATE _____ TYPED NAME AND SIGNATURE OF SUPERVISOR (if applicable) _____

CONCURRENCE (if applicable)	AUTHORIZATION
TYPED NAME AND SIGNATURE OF DIVISION CHIEF [REDACTED]	TYPED NAME AND SIGNATURE OF AUTHORIZING OFFICIAL E. R. SAUNDERS

DATE CONCURRED **15 May 1961** DATE AUTHORIZED _____

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