STATE OF **OHIO**

DEPARTMENT OF NATURAL RESOURCES

ACTIVITY REPORT

NAME		CLASS	UNIT 735	LOCATION COLUMBUS	pp START
			SCHEDULE HOURS A.M.	P.M.	pp END
CITY, STATE, ZIP PHONE		RATE	HOURS REG	HOURS OVER	GROSS
			BEG BAL	COMP TIME EARNED	USED / BAL

	S	M	T		T	F		TOTAL		M	T	W	T	F	S	TOTAL	TOTAL
TOTAL ACTIVE HOURS																	
PERSONAL IN LIEU OF SICK LEAVE																	
VACATION IN LIEU OF SICK LEAVE																	
COMP TIME IN LIEU OF SICK LEAVE																	
OLD SICK																	
NEW SICK																	
VACATION																	
PERSONAL																	
HOLIDAY																	
OTHER																	
COMP TIME- USED																	
TOTAL ADJUSTMENTS																	
ACTIVE PAY & ADJUSTMENTS																	
OVERTIME																	
COMP TIME EARNED																	
TOTAL TIME IN PAY STATUS																	
FMLA																	
TOTAL																	
VEHICLE COMMUTE																	

DICATED ABOVE IS ^ TRUE RECORD THE THE PERIOD.

EMPLOYEE'S SIGNATURE

DATE

SUPERVISOR'S SIGNATURE

DATE

DNR 0417

REV. 11/94