

## REQUEST, AUTHORIZATION, AND REPORT OF COMPENSATORY TIME

(The proponent is ARC-F)

THRU <i>(if applicable)</i>	TO <i>(approving official)</i>	FROM
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T & A ACTIVITY	SOCIAL SECURITY NUMBER	EMPLOYEE NAME	DATE WORK TO BE PERFORMED	NUMBER OF HOURS REQUESTED

NATURE OF DUTIES AND JUSTIFICATION FOR COMPENSATORY TIME

TYPED NAME AND TITLE	REQUESTED BY <i>(signature)</i>	DATE
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TYPED NAME AND TITLE*	AUTHORIZED BY <i>(signature)</i>	DATE
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**NGB Form 46-14, JUN 99 (Adobe v. 4.0)** \* Approving official must be at least one level higher than the first line supervisor.  
 (Replaces NGB Form 46-14 dated APR 97 which is obsolete)