From:	Hays, Marilyn
To:	Houston, Pamela
Cc:	Bishop, Debbie
Subject:	Your emergency response overtime requests for PPE 9/16 & 9/30 have been approved
Date:	Friday, September 8, 2017 5:16:23 PM
Attachments:	2017_09_08_17_15_08.pdf

Please see the attachment for your signed copies.
If you have any questions, please contact Debbie Bishop at x7529.
Thanks,
Marilyn Hays
Superfund Division
913-551-7862

7020317

Request for Authorization of Overtime/Compensatory Time

United States Environmental Protection Agency Region 7 – Superfund Division	1. Pay Period # / Ending Date #26 / 9/16/2017	2. Account Number 1617 06L0X13 H001
	3. Document Control Number	4. Estimated Cost $4,429
	5. Check One: X Original Request	____ Extension

Authority for approving payment for overtime, holiday pay or the allowance of compensatory time in lieu of payment for overtime is reserved only to those officials stated in agency delegations or further redelegated by those officials. Overtime must be authorized prior to its performance except in cases of emergency, and overtime actually worked under this authorization must be recorded on the employee's time and attendance record. Staff in an acting capacity of a Branch Chief or the Deputy Director are not authorized to sign these requests.

Justification or Reason:

Support to Region 6 Hurricane Harvey Emergency Response: HOUSTON, TX

Employee Name	Grade or Rate	Premium Pay Authorized			
		Estimated # of hours			
		Overtime	Comp	Holiday	Dates
PAMELA HOUSTON	12	100			9/8 - 9/16

Branch Chief Signature:	Requested by: (branch/section chief) Typed or Printed Name and Title (No *acting* branch/section chief can authorize)	Date
		9/7/17
Approved by Signature:	**Approved by:**	**Date**
	Mary P. Peterson Superfund Division Director	9-8

EPA SUPR FORM S2560-7 SUPR (Rev. 3.16.05) Previous editions are obsolete.
(Refer to Delegation of Authority dated August 14, 2003)
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Request for Authorization of Overtime/Compensatory Time

United States Environmental Protection Agency Region 7 – Superfund Division	1. Pay Period # / Ending Date #27 / 9/30/2017	2. Account Number 1617 06L0X13 H001
	3. Document Control Number	4. Estimated Cost $4,429
	5. Check One: X Original Request	____ Extension

Authority for approving payment for overtime, holiday pay or the allowance of compensatory time in lieu of payment for overtime is reserved only to those officials stated in agency delegations or further redelegated by those officials. Overtime must be authorized prior to its performance except in cases of emergency, and overtime actually worked under this authorization must be recorded on the employee's time and attendance record. Staff in an acting capacity of a Branch Chief or the Deputy Director are not authorized to sign these requests.

Justification or Reason:

Support to Region 6 Hurricane Harvey Emergency Response: HOUSTON, TX

Employee Name	Grade or Rate	Premium Pay Authorized			
		Estimated # of hours			
		Overtime	Comp	Holiday	Dates
PAMELA HOUSTON	12	100			9/17-9/30

Branch Chief Signature:	**Requested by:** (branch/section chief) Typed or Printed Name and Title (No *acting* branch/section chief can authorize)	**Date** 9/7/17
Approved by Signature:	**Approved by:** Mary P. Peterson Superfund Division Director	**Date** 9-8

EPA SUPR FORM S2560-7 SUPR (Rev. 3.16.05) Previous editions are obsolete.
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