

Dept: CASPO

### Pay Period Dates

Demolder, Carl
<u>Last Name, First</u>

[illegible]

Carl Demolder

**Date:** 1/14/18

Date:

**I certify that this report represents a reasonable estimate of the actual effort expended during the period reported.**

<b>Index</b>	<b>REG</b>	<b>SOT</b>	<b>POT</b>	<b>SICK</b>	<b>VAC</b>	<b>HOL</b>	* _____	<b>Recharge</b>	
CAP258R								<b>Timekeep.</b>	