

**COUNTY OF VENTURA  
AUDITOR-CONTROLLER  
COMPENSATORY TIME OFF BANK FORM**

EMPLOYEE NAME \_\_\_\_\_

EMPLOYEE ID NUMBER \_\_\_\_\_

AGENCY \_\_\_\_\_

JOB CLASSIFICATION \_\_\_\_\_

UNION (CHECK ONE):

- IUOE
- SEIU
- SPOAVC
- VCDSA
- VCPPOA
- VCSCOA
- VEA

COMP BANK ACTION (CHECK ONE):

- ESTABLISH CTO BANK
- REMOVE CTO BANK

\_\_\_\_\_  
EMPLOYEE SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DEPARTMENTAL APPROVAL

\_\_\_\_\_  
DATE

**FOR AUDITOR-CONTROLLER PAYROLL USE ONLY**

CTO Balance \_\_\_\_\_ Pay Period \_\_\_\_\_ CTO Hours Cashed Out \_\_\_\_\_ Pay Period \_\_\_\_\_

CTO Current PP \_\_\_\_\_ Pay Period \_\_\_\_\_ CTO Current PP Adjustment \_\_\_\_\_ Pay Period \_\_\_\_\_

CTO Ended \_\_\_\_\_ Pay Period \_\_\_\_\_ CTO Established \_\_\_\_\_ Pay Period \_\_\_\_\_

Initials

Initials