

<b>INCIDENT TIME REPORT</b>			1. Hired At (e.g., ID-BOF)		
2. Employee Common Identifier		3. Type of Employment (X One) <input type="checkbox"/> Casual <input type="checkbox"/> Federal <input type="checkbox"/> Other		4. Hiring Unit Name (e.g., Ranger District)	
5. Name (First, Middle, Last)			6. Hiring Unit Phone Number		7. Hiring Unit Fax Number

Column A			Column B			Column C			Column D										
Same as Column <input type="checkbox"/> A			Same as Column <input type="checkbox"/> A			Same as Column <input type="checkbox"/> A <input type="checkbox"/> B			Same as Column <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C										
8. Incident Name			8. Incident Name			8. Incident Name			8. Incident Name										
9. Incident Order Number (e.g., ID-BOF-000123)			9. Incident Order Number (e.g., ID-BOF-000123)			9. Incident Order Number (e.g., ID-BOF-000123)			9. Incident Order Number (e.g., ID-BOF-000123)										
10. Fire Code (e.g., B2C5)	11. Resource Request Number (e.g., O-33)		10. Fire Code (e.g., B2C5)	11. Resource Request Number (e.g., O-33)		10. Fire Code (e.g., B2C5)	11. Resource Request Number (e.g., O-33)		10. Fire Code (e.g., B2C5)	11. Resource Request Number (e.g., O-33)									
12. Position Code (e.g., CRWB-T)	13. AD Class (e.g., B)	14. AD Rate \$	12. Position Code (e.g., CRWB-T)	13. AD Class (e.g., B)	14. AD Rate \$	12. Position Code (e.g., CRWB-T)	13. AD Class (e.g., B)	14. AD Rate \$	12. Position Code (e.g., CRWB-T)	13. AD Class (e.g., B)	14. AD Rate \$								
15. Home/Hiring Unit Accounting Code			15. Home/Hiring Unit Accounting Code			15. Home/Hiring Unit Accounting Code			15. Home/Hiring Unit Accounting Code										
Mo	Day	Start	Stop	Hours	Mo	Day	Start	Stop	Hours	Mo	Day	Start	Stop	Hours	Mo	Day	Start	Stop	Hours
Year		16. Total Hours		Year		16. Total Hours		Year		16. Total Hours		Year		16. Total Hours					

*In the "hours" column, indicate "H" for hazard pay, "E" plus % for environmental differential, "T" for travel* 17. Total Hours (all columns):

<b>18. Commissary and Travel</b>						<b>For Payment Center use only</b>					
18a. Month	18b. Day	18c. Category (e.g., commissary, meals, lodging, mileage, medical, etc.)		18d. Reimbursement	18e. Deduction	18f. FireCode					
<b>Total</b>				\$	\$						

19. Remarks						20. Employee Signature					
						21. Time Officer Signature					

*NOTE: The above items are correct and proper for payment from available appropriations.*