

TS-4
CONDUCTORS & TRAINMEN
TIME RETURN & DELAY REPORT
OTHER THAN PASSENGER SERVICE



PENALTY

REPORT NUMBER

1
2

DOCUMENT SERIAL NO.

3F 430064 RW 6/94
Issued by
Y2/188

PLACE FIRST PRINT ON DUTY	WITH ENGINEER	
PLACE FINALLY PRINT OFF DUTY	DIVISION	C.C.#

DAY OF WEEK _____

PROJECT NO.	COST CENTER NO.	CLASS OF RATE	TYPE OF SERVICE	ASSIGNMENT NO.	DATE ON DUTY
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	MO. DAY YR.

FORM OF THIS TRIP

PLEASE PRINT

FORM OF THIS TRIP	TRIP	POSS.	EMPLOYEE NO.	INITIALS	LAST NAME	CONDUCTOR	HOW PAID	HRS. OF SERV. LAW DEADHEAD TO ASSIGN		TIME FIRST WENT ON DUTY		TIME FINALLY WENT OFF DUTY		TOTAL ELAPSED TIME ON DUTY		TOTAL TIME ON DUTY UNDER HRS. OF SERVICE LAW	
								HR.	MIN.	HR.	MIN.	HR.	MIN.	HR.	MIN.	HR.	MIN.
<input type="text"/>	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DEADHEAD INFORMATION

BY TRAIN #

HR. MIN.

BY VEHICLE

HR. MIN.

FROM

TO

FROM

TO

CLAIM DETAIL (See Instruction No. 9)

REGULATION(S)

1 PAY EIGHT(8) HOURS PENALTY FOR VIOLATION OF RULE 16 LETTER K. EMPLOYEE WILL HAVE AT LEAST TWO (2) WEEKS NOTICE TO APPLY FOR THE OPTIONAL DISPLACEMENT THROUGH THE ESTABLISHED BULLETINS.

POSITION 1

ASSIGNMENT NO. MO. DAY OFF DUTY TIME HR. MIN.

PREVIOUS TRIP:

POSITION 2

ASSIGNMENT NO. MO. DAY OFF DUTY TIME HR. MIN.

RATING PORTION OF TIME SLIP

For Office Use Only

REG. NO.	OCCUPATION	CLASS OF RATE	RATE	STR. HRS.	OT HRS.	CONSTRUCTIVE CODE	CONS. HRS.	COST CENTER	PROJECT NO.

	ALLOW CODE	ALLOW CODE	CONSTRUCTIVE ALLOW-APPLIES	CLAIM CODE	CONSTRUCTIVE ALLOWANCE HRS(MIN)
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

REPORTING TIME CORRECT	RELEASE TIME CORRECT	I CERTIFY THIS REPORT IS CORRECT	APPROVE TIME IS APPROVED	AUTHORIZATION CODE
SIGNATURE & TITLE	SIGNATURE & TITLE	SIGNATURE CONDUCTOR	SIGNATURE & TITLE	