	IIIVIE & PAY SHEEL - NO. 44													CHECK No			
	EMPLOYER'S												WEEK ENDING/20				
EMPLO	NAME AND ADDRESS													☐ PERMANENT			
	E AND ADDRES	<u>S</u>					1	CLASS	IFICATION		WORKED			_	SUAL		
DAYS WEE		STOPPING TIME	STARTING TIME	STOPPING TIME	STARTING TIME	STOPPING TIME	TOTAL HOURS	ORDINARY	11/ TIME		DOUBLE	DOUBLE	DOUBLE	7.00 P.M.	HOURS 12.00 A.M.		
		+	+				WORKED	UNDINANI	1 ¹ / ₂ TIME	13/ ₄ TIME	TIME	TIME + 1/2		12.00 A.M.	7.00 A.M.		
1st							<u> </u>	<u> </u>									
2nd												l					
3rd																	
4th																	
5th																	
6th			15				MI										
7th					M		1		4								
						TOTALS		1	:+0d								
Annu	al Pay Rate (if a	applicable) \$	j			@ Zic	ons P	ty Lin	Hree				.1				
	ary Wage		ŀ			p/hr				Employees are required to personally ente in ink, all starting and stopping times							
Overti	ime		1	hrs @ \$	p/hr				_	showing all meal breaks and any other time off during the day.							
Overti	ime		1	hrs @ \$	p/hr				_								
Satur	day-Sunday F	enalty	t	hrs @ \$	p/hr				_	I have worked the above hours and received							
Public	c Hol./Annual	Hol. Pay	ł	nrs @ \$	p/hr				_			a the abo e shown.		ifs and i	eceived		
CI 19	Mon-Fri Pena	alty	1	nrs @ \$		p/hr	p/hr					01.5					
Other	r Payments						<u> </u>		_								
					GROSS	S WAGE			_								
Less:	: Tax		\$:			EMPL				EMPLOYEE	DYEE'S SIGNATURE					
	Meals/Board	d		\$:												
	Other Deduc	ctions		\$:		<u></u>			Employ	yer Super.	Contributio	on:	\$:		
				,	NET WAG	GE PAID				Paid to)			Fund	/Scheme		

© ZIONS SYSTEMS — No. 44