

Day	Date	Start	Finish	Break	Normal Time	Time and Half	Double Time
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							
Sunday							
Company name _____				Total Hrs . _____			

Shift Worked

- Day shift *Starts > 6am and finishes before 6pm*
 Afternoon shift *Finish > 6pm but before 12am*
 Night shift *Finishes > 12am but before 8am*

Allowances

A) _____ x Qty
 B) _____ x Qty

Fax to 3207~7477

Before closed of business Each Monday or Wednesday

