# TIME & PAY SHEET - No. 44

CHECK No. _____

WEEK ENDING
/ /

EMPLOYER'S NAME AND ADDRESS _____

EMPLOYEE'S NAME AND ADDRESS _____ CLASSIFICATION _____

☐ PERMANENT
☐ CASUAL

| DATE OF WEEK | STARTING TIME | STOPPING TIME | STARTING TIME | STOPPING TIME | STARTING TIME | STOPPING TIME | TOTAL HOURS WORKED | HOURS WORKED | | | | | | CLOCKING | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | ORDINARY | 1½ TIME | 1½ TIME | DOUBLE TIME | DOUBLE TIME + ½ | DOUBLE TIME + ½ | 1 HOUR 12 O'CLOCK | 12 O'CLOCK 12 O'CLOCK |
| 1st | | | | | | | | | | | | | | | |
| 2nd | | | | | | | | | | | | | | | |
| 3rd | | | | | | | | | | | | | | | |
| 4th | | | | | | | | | | | | | | | |
| 5th | | | | | | | | | | | | | | | |
| 6th | | | | | | | | | | | | | | | |
| 7th | | | | | | | | | | | | | | | |
| | | | | | | TOTALS | | | | | | | | | |

Annual Pay Rate or salaries $ _____

| | | | | |
|---|---|---|---|---|
| Ordinary Wage | _____ hrs @ $ | _____ p/hr | | |
| Overtime | _____ hrs @ $ | _____ p/hr | | |
| Overtime | _____ hrs @ $ | _____ p/hr | | |
| Saturday-Sunday Penalty | _____ hrs @ $ | _____ p/hr | | |
| Public Hol./Annual Hol. Pay | _____ hrs @ $ | _____ p/hr | | |
| Cl. 19 Mon-Fri Penalty | _____ hrs @ $ | _____ p/hr | | |
| Other Payments | | | | |
| | | GROSS WAGE | | |
| Less: Tax | $ | | | |
| Meals/Board | $ | | | |
| Other Deductions | $ | | | |
| | | NET WAGE PAID | | |

Employees are required to personally enter in ink, all starting and stopping times, showing all meal breaks and any other time off during the day.

I have worked the above hours and received the Net Wage shown.

_____
EMPLOYEE'S SIGNATURE

Employer Super Contribution $ _____

Paid to _____ Fund/Scheme _____

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