No. 10 Week Ending 19.8.2007

Name John Smith

WORK	Hours	Rate	$	¢
ORD. TIME				
OVERTIME X 1½				
OVERTIME X 2				
HOLIDAY PAY				
SICK PAY				

DEDUCTIONS	GROSS WAGES			
TAX				
SUPER.				
INSUR.				
HOSPITAL/MED.				
TOTAL				
NET WAGES $				

I hereby certify that all particulars on this Time Card are correct.

Signed John Smith.

	MORNING		AFTERNOON				
	1	2	3	4	ORD	1½	2
	Mo 7:59			Mo 16:31	8		
	Tu 7:58	Tu 12:00	Tu 12:30	Tu 16:30	8		
	We 7:55			We 17:32	8	1	
	Th 8:00			Th 18:31	8	2	
	Fr 7:58			Fr 16:30	8		
	Sa 7:59	Sa 12:02	Sa 12:30	Sa 13:30	–	3	2
				TOTAL	40	6	2

Re-Order No. QR-350W
GLOBAL TIME SYSTEMS
(03) 9338 5511