

**J. Garnons Williams Ltd.**

**TIME SHEET**

Payday:	Year:	Employee:					
<input type="checkbox"/> Regular <input type="checkbox"/> Permanent Part Time <input type="checkbox"/> Casual							
	Date	Hours		Overtime		Hours to be Paid	Shift Location
		Start	Stop	Start	Stop		
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

For Office Use Only

R	
SICK	
VAC	
STAT PAYOUT	
STAT TAKEN	
R-ST WKD	
OT @ 1.5	
OT @ 2.0	
REIM.	
MLGE.	
TRNG. REIM.	
TRNG. HRS.	
LOA	
AC	
EP	
NEC	
FO	
KW	
MV	
WW	
TOTAL	

**\*\* HAVE YOU SIGNED IN FOR EVERY SHIFT? \*\***

Employee's Signature & any additional information needed for accurate processing:

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