

FORM 'O'

[Rule 114 (1)]

OVERTIME MUSTER - ROLL FOR PERSONS ON EXEMPTED WORK

Month ending.....

Worker's No. in Register	Name	Department	Date on which overtime has been taken	Extent of overtime on each occasion	Total overtime worked	Normal hours	Normal rate of pay	Normal rate of pay	Overtime rate of pay	Total amount
1	2	3	4	5	6	7	8	9	10	11