

MAINTENANCE OF WAY DEPARTMENT SEMI-MONTHLY TIME REPORT

PERIOD ENDING Jan 31 19 67 LOCATION Centralia Gang No. _____

TACOMA Division

I certify that the men named below have been employed as specified in the service of this company and that the time and rates are correct.

H. J. Best Signed

BURRO Crane 5 137 321 513-14-8119 H.J. Best Jan 31 1957 18-56 35 45605 BURRO 9351		FOREMAN—HAVE YOU MAILED CER-1 AND W-4 FOR ALL NEW EMPLOYEES? CHECK “YES” OR “NO” AT RIGHT																												YES ☒ NO ☐	
		1ST. PERIOD		1 2 3 4 5 6 7 8 9 10 11 12 13 14 15															TIME HOURS		Leave Time Hour Column Blank For Dist. Acct. Except When Time Check is Requested										
5 137 321 513-14-8119 H.J. Best Jan 31 1957 18-56 35 45605 BURRO 9351		2ND. PERIOD		16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31																											
		St. Time		8 8 8 8 8 8 8 8 8 8 8 8 8 8 8																	Count										
		Holiday																			Working Days										
		Vacation																			Base Days										
		Sick																													
		Other																			Total Hrs.		Adj. Amt.								
O. T. 1½		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2																													
		St. Time																			Count										
		Holiday																			Working Days										
		Vacation																			Base Days										
		Sick																													
		Other																			Total Hrs.		Adj. Amt.								
		O. T. 1½																													
		St. Time																			Count										
		Holiday																			Working Days										
		Vacation																			Base Days										
		Sick																													
		Other																			Total Hrs.		Adj. Amt.								
		O. T. 1½																													
		St. Time																			Count										
		Holiday																			Working Days										
		Vacation																			Base Days										
		Sick																													
		Other																			Total Hrs.		Adj. Amt.								
		O. T. 1½																													
		St. Time																			Count										
		Holiday																			Working Days										
		Vacation																			Base Days										
		Sick																													
		Other																			Total Hrs.		Adj. Amt.								
		O. T. 1½																													
		St. Time																			Count										
		Holiday																			Working Days										
		Vacation																			Base Days										
		Sick																													
		Other																			Total Hrs.		Adj. Amt.								
		O. T. 1½																													
		St. Time																			Count										
		Holiday																			Working Days										
		Vacation																			Base Days										
		Sick																													
		Other																			Total Hrs.		Adj. Amt.								
		O. T. 1½																													
		St. Time																			Count										
		Holiday																			Working Days										
		Vacation																			Base Days										
		Sick																													
		Other																			Total Hrs.		Adj. Amt.								
		O. T. 1½																													
		St. Time																			Count										
		Holiday																			Working Days										
		Vacation																			Base Days										
		Sick																													
		Other																			Total Hrs.		Adj. Amt.								
		O. T. 1½																													
FOREMAN WILL SHOW TOTAL HOURS DAILY ON EACH SHEET.		DAILY TOTAL ST. TIME HOURS		8 8 8 8 8 8 8 8 8 8 8 8 8 8 8																	COUNT: 1st. Half = Middle Month 2nd. Half = Employees										
		“ “ Holiday “																													
		“ “ Vacation “																			Working and base days must be shown for all Group III, V and VI Rates										
		“ “ Sick “																													
		“ “ Other “																			Total Hrs.		Adj. Amt.								
		“ “ O. T. 1½ “		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2																											
		1ST. PERIOD		1 2 3 4 5 6 7 8 9 10 11 12 13 14 15																	TOTAL HOURS										
		2ND. PERIOD		16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31																	TOTAL HRS. O. T.										