

S T U V W X Y Z
 MEAL MISC. N.P. BOND GR. IN INS. SUMM PAY
 "X" BLOCKS FOR D. A. OFFICE ONLY

STATION AND OFFICE FORCE PAY CARD

N. P. FORM 9111A

TAX CODE	DEPT. NO.	X	DISTR. CODE	X	LOCATION NUMBER	X	<small>WILLIAMSON SAFETY SYSTEM</small>	
STR. TIME RATE	PUN. O. T. RATE	OCCUP.		I. C. C. DIV. X				
EMP. NO.	SOC. SEC. NUMBER	PERIOD ENDING			X NAME			STATION

D A Y	TIME ON OCCUPATION IMPRINTED ABOVE				TIME WORKED ON OTHER OCCUPATIONS											
					OCCUP.				OCCUP.				OCCUP.			
					RATE				RATE				RATE			
	STR. TIME	1½ TIME	TIME PAID NOT WKD. VAC.	OTH.	STR. TIME	1½ TIME	TIME PAID NOT WKD. VAC.	OTH.	STR. TIME	1½ TIME	TIME PAID NOT WKD. VAC.	OTH.	STR. TIME	1½ TIME	TIME PAID NOT WKD. VAC.	OTH.
1/16																
2/17																
3/18																
4/19																
5/20																
6/21																
7/22																
8/23																
9/24																
10/25																
11/26																
12/27																
13/28																
14/29																
15/30																
31							1									4

TOTAL STR.	TIME	AMOUNT	1	TIME	AMOUNT	2	TIME	AMOUNT	3	TIME	AMOUNT	4	TOTAL HOURS
TIME 1½													HOURS
TIME NOT WKD.													HOURS
TOTAL				TOTAL			TOTAL			TOTAL			TOTAL AMOUNT

A FORM 9111 OR 9111A SHOULD BE FURNISHED FOR EACH OFFICE WHERE AN EMPLOYEE WORKS DURING THE PAYROLL PERIOD.
 THE FOUR COLUMNS ARE PROVIDED TO TAKE CARE OF CHANGES IN RATES AND OCCUPATION AT EACH OFFICE.
 RETAIN THE TOP COPY.
 MAIL THE CARBON COPY (CARD) WITH FORM 9120 TO THE DISTRICT ACCOUNTANT PROMPTLY AT THE END OF PAYROLL PERIOD.
 CARBON COPY (CARD) SHOULD ACCOMPANY FORM 807 IF EMPLOYEE LEAVES THE SERVICE.

MONTH	PER D.	VAC.	ORIGINATED BY	DIST. VARIANCE	PUNITIVE OVERTIME
1 2 4 7	1 2		D.A. AGENT		

OUT OF SERVICE
 I. C. C. DIVISION
 STATION NO.
 MALE FEM.
 DEPT. NO.

TAX CODE
 DISTRIBUTION CODE
 EMPLOYEE NUMBER