ACTIVITY AND WAGE REPORT

NAME: _____ S.I.N. _____

ADDRESS: _____

BENEFICIARY'S NAME for the PENSION: _____

CREW [_____] - DEPARTMENT [_____] - JOB CATEGORY [_____]

DATE: - *(Details of day's activities)*	**HOURS:**	**RATE:**	**AMOUNT:**
_____ -*	(Hours)_____	@ $_____	$_____
(rates on back)	(S/D) _____	@ _____%	$_____
_____ -*	(Hours)_____	@ $_____	$_____
(rates on back)	(S/D) _____	@ _____%	$_____
_____ -*	(Hours)_____	@ $_____	$_____
(rates on back)	(S/D) _____	@ _____%	$_____
_____ -*	(Hours)_____	@ $_____	$_____
(rates on back)	(S/D) _____	@ _____%	$_____
_____ -*	(Hours)_____	@ $_____	$_____
(rates on back)	(S/D) _____	@ _____%	$_____

DATED: _____ TOTAL WAGES: ..... $_____

SIGNATURE: _____ VACATION PAY @ ____% $_____

****

WAGE DEDUCTIONS: **(To be completed by the office)**

Union Dues (2%)	$_____		
Pension (8%)	$_____	TOTAL **GROSS WAGES:**	**$**_____
Canada Pension Plan	$_____	Less DEDUCTIONS:	$_____
Employment Insurance	$_____	Sub Total >>>>>>	$_____
Income Tax (%)	$_____	Less ADVANCE NO._____	$_____
TOTAL DEDUCTIONS:	**$**_____	**NET TOTAL:**	**$**_____

AUTHORIZED: _____ _____ (DATE PAID)

APPROVED: _____ _____ (VOUCHER NUMBER)