



CREW WEEKLY TIMESHEET

PROD. TITLE:

PROD. COMPANY:

DEPARTMENT		OCCUPATION			EPISODE	WEEK ENDING		
NAME						RESIDENT	NON RESIDENT	
LOANOUT				ITF		FSO		UNION
RATES		/WEEK	/DAY	/HOUR		OTHER RATES		UNION ID #
SIN		GST#		PST#		RULE	EMP ID	
				MEMBER		PERMIT		

DAY	DATE	TRAVEL START	CALL TIME	MEAL ONE		MEAL TWO		WRAP TIME	TRAVEL END	WORK HOURS	S.T.	O.T.	O.T.	O.T.	MP	EQUIV S.T. HRS.
				START	END	START	END									
SUN																
MON																
TUE																
WED																
THU																
FRI																
SAT																
IMPORTANT: Employment Insurance requires that all hours are documented for flat, guaranty & hourly work.									TOTAL WORK HOURS							
									TOTAL EQUIV. S.T. HOURS							

CALCULATIONS				GROSS EARNING DISTRIBUTIONS			NET ADJUSTMENT DISTRIBUTIONS				
QTY	WKS/DAYS HOURS	RATE	AMOUNT	DESC	AMT	ACCOUNT CODE	DESC	AMT	ACCOUNT CODE		
TOTAL CALCULATED GROSS EARNINGS:				TOTAL		GROSS EARNINGS	PROD	P.M.	ACCT	DEPT	CREW