FORM 20
(see Rule 137)

OVERTIME MUSTER ROLL FOR EXEMPTED WORKERS

Month ending …….20……

Number in the register of adult workers	Name of exempted worker	Department	Dates on which overtime has been worked	Extent of overtime on each occasion	Total overtime hours worked or production in case of piece workers	Normal hours	Normal rate of pay for piece work or rate or pay per hour	Over time rate of pay	Normal earnings	Overtime earning earnings	Total earnings	Date on which overtime payments made.
1	2	3	4	5	6	7	8	9	10	11	12	13