TIME SHEET

Clerks and Checkers Local 1593
International Longshoremen's Association, AFL-CIO P.O. Box 26363 100 Zoo Park Way Jacksonville, Florida 32226

| Name: | Social Security (Last Six Only: |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Date (s) <br> Worked | Description of Work Performed | Financial <br> Secretary <br> Salary <br> \$65.00 | President <br> Salary <br> \$75.00 |  |  |  |
|  |  |  | S/T <br> Time <br> Hours | O/T <br> Time <br> Hours |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  | Totals | 0.00 | 0.00 | 0.00 | 0.00 |

I, the undersigned, certify that the above wages were earned for performance of I.L.A. Local 1593 union business and I acknowledge receipt of the check (copy attached) as payment in full thereof.

Date Submitted: $\qquad$ $1 \quad 1$ 1 Signature: $\qquad$ Do Not Write Below This Line-Must be signed by the President or Vice President.

Approved by: Signature:

## Deductions

| Reason for Deduction: | Amount of Deduction: |
| :--- | :--- |
|  |  |

I hereby authorize ILA Local 1593 to deduct the above amount from this pay check only.


