

**FORM - 15**

Prescribed under Rule 103

**OVERTIME MUSTER ROLL FOR EXEMPTED WORKERS**

Month ending ..... 19.....

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 of pay per hour	Overtime rate of pay	Normal earnings	Overtime earnings	Total earnings	Date on which Overtime payment made
1	2	3	4	5	6	7	8	9	10	11	12	13

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