New SARAWAK TRIBUNE — SUARA SARAWAK

OVERTIME/RECALL CLAIM FORM

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Name   : Mohammad Romizan Bin Murad
Designation : Digital Uploader
Department : Digital Department

Claim Details	
Overtime	✓
Recall	

Date	Time From	Time To	Total OT/Recall	Assignment Details *Please specify your assignment details
11/3/2024	3 P.M.	10 P.M.	8 Jam	OT Uploader

CLAIMED BY,	VERIFIED BY,	APPROVED BY,
……………………………	…………………………...	…………………………...
NAME:	NAME:	NAME:
DATE:	DATE:	DATE:

To Fill by HR

Rate per Hour   : RM _____
Total OT   : _____
Total Amount Payable : RM _____

…………………………………
Executive Account/Admin/HR
Date:

Record By HR	
OT 1.0 Time	_____ Hours
OT 1.5 Times	_____ Hours
OT 2.0 Times	_____ Hours
OT 2.5 Times	_____ Hours