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| År Avlöningsperiod: | Månad | Personnummer |
| Arbetsplats | | Efternamn, förnamn |
| Vikarie som | | Adress |
| Telefon bostad | | Postnr och postadress |

**ÖVERENSKOMMEN ANSTÄLLNINGSTID, Tidsperioder (år, mån, dag)**

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| Fr o m  T o m | Fr o m  T o m | Fr o m  T o m | Fr o m  T o m | Fr o m  T o m |

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| **ARBETAD TID** | | | **Ansvar:** | | | **Verksamhet:** | | | **Ändamål:** | | | **Projekt:** | | | **Objekt:** | |
| **Datum** | Klockan | | | **Arbet.** | **Sjuk** | | **OB-tid**  **Vardag Veckoslut Storhelg** | | | | | | Övertid/Jour | | | **Anmärkning** |
|  | Fr o m | T o m | | **tim** | **tim** | |  |  | Dag/ | Helg/ |  | Helg/ | Enkel | Kval | |  |
| Kväll  19-22 | Natt  22-06 | natt/  kväll | natt  22-06 | Dag/  kväll | natt  22-06 |
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| **Summa** |  |  | |  |  | |  |  |  |  |  |  |  |  | |  |

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Arbetstagarens underskrift Arbetsgivarens underskrift

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Namnförtydligande