Name:	(Pleas	se Print)	Date		
	Hour Petition Form for Work i		Please fill out f	orm comple	tely
TT] :- (			Attach copies performed,	of all pays	tubs
your job classi entry. Work m as a salaried en version will ca fee payments of performed. The	t contain your name, the date or dates of the fication, where the work was performed, the nust be submitted on a <b>month to month</b> basis imployee, an entry will be required for each plculate total hours and percentage dues for your the requested hours must be submitted to be B.O.E. will allow up to an additional sixty (nion. Please refer to the Dispatch Rules for "Femion."	e number of hours worked, and the hourly wais. Do not include work from two separate roay period. Be sure to enter your gross wage you. The Petition form, copy of paycheck stup the B.O.E. no later than thirty (30) days for feelight of the paystub documents.	vage. Each call must be months on a single form es at the bottom of the b and all current perce bllowing the month in v	n. If you are page. The el ntage repre which the w	e working lectronic sentation ork was
Date (s) Worked	Employer/Venue	Event/Show/Shop	Job/Class/Position	Hours Worked	Wage(s)
Accepted Explanation:		Total Hours:			
		Gross Wages:			
Rej	ected		6 Representation Fee:		
	BOE Chair Signature:		Date:		